

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

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MARION COUNTY SOE

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

David Metzger Blackwell

3. Address (include post office box or street, city, state, zip code)

6 Olive Circle Pass
Ocala, FL 34472

4. Telephone

(352)233-8016

5. E-mail address

vicksoner1313@hotmail.com

6. Office sought (include district, circuit, group number)

County Commissioner District 3

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation Republican Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Luci Blackwell

11. Mailing Address

6 Olive Circle Pass

12. Telephone

(352)208-0878

13. City **14. County** **15. State** **16. Zip Code** **17. E-mail address**

Ocala

Marion

FL

34472

LUCILW0871@hotmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Florida Credit Union

20. Address

10 Bahia Ave. Ln.

21. City **22. County** **23. State** **24. Zip Code**

Ocala

Marion

Florida

34472

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

11-5-23

26. Signature of Candidate

X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

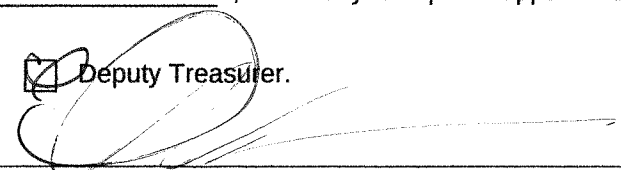
I, Luci Blackwell, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

11/9/23

Date

X


Signature of Campaign Treasurer or Deputy Treasurer