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## APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

	The Part of the State of the St
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)  3. Address (include post office box or street, city, code)  4. Telephone  5. E-mail address  4. Tolephone  6. E-mail address  7. E-mail address	state, zip
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office applicable:  My intent is to run as a Write-	
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 ☐Party cand	didate.
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer	
11. Mailing Address  12. Telephone  12. Telephone  13. Telephone  1407 ) 30/-5	303
13. City 14. County 15. State 16. Zip Code 17. E-mail address  15. State 16. Zip Code 17. E-mail address  15. State 16. Zip Code 17. E-mail address	
18. I have designated the following bank as my	
19. Name of Bank  20. Address  1302 Cost Vine St	
21. City 22. County 23. State 24. Zip C H. 3474	ode 4
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  26. Signature of Candidate  X  All  Ada  27. Date	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
I, GLOKTA EMANUEZ , do hereby accept the appo	intment
designated above as: Campaign Treasurer Deputy Treasurer.	
12/26/2018 X Glorie Emanuel Signature of Campaign Treasurer or Deputy Treasure	Or.