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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)

officer before opening the campaign account.	OFFICE USE ONL
1. CHECK APPROPRIATE BOX(ES):	
	reasurer/Deputy Depository Office Part
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
4. Telephone 5. E-mail address	St cloud FL 34769
4. Telephone 5. E-mail address	It cloud 76 34769
(407) 4141414 ccommish@cfl.rr.c	
6. Office sought (include district, circuit, group number)	7.lf a candidate for a <u>nonpartisan</u> office, check if
	applicable:
Stcloud City Council Seat 3	My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> office, check block and fill	in name of party as applicable: My intent is to run as a
Write-In No Party Affiliation	Party candidate.
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer	
Charles Churk Cooper	
11. Mailing Address	12. Telephone
22 Kentucky AVE  13. City  14. County  15. Stat	(407)414-1414
	te 16. Zip Code 17. E-mail address
5t Cloud Osceda 71	34749
18.I have designated the following bank as my  Primary Depository  Secondary Depository	
	20. Address
BB+T	13th St.
21. City 22. County	23. State 24. Zip Code
St Cloud Osceola	72 34769
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 2	26. Signature of Candidate
6/11/20	x Charles d. Gran
7. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
Charles Chuck Cooper , do hereby accept the appointment	
(Please Print of Type Name)	, do neieby accept the appointment
lesignated above as: Campaign Treasurer	Deputy Treasurer.
////>X	101 mln 2. 400y
Date	gnature of Campaign Treasurer or Deputy Treasurer