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

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

(PLEASE PRINT OR TYPE)

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

JAN 5 '24 PM12:00 OSC SOE

**OFFICE USE ONLY** 

opening the campaign account.					
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 PO Box or Street, City, State, Zip Code):		
(Please Print or Type Name)			2500 Ba	2200 10	
		2500 Bronco AR			
4. Telephone: 5. Candidate's Voter		ST. Cloud, F1 34771			
•	5. Candidate's Voter			dress:	
(407) 209 932 6 106181244 (not required for qualifying purposes) Wiley, black y-sheriff gma; 1.100					
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a nonpartisan office, check the box if applicable:					
Sheriff I intend to run as a Write-In Candidate.					
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a					
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐ Lemockar Party candidate.					
10. I have appointed the following person to act as my:   Campaign Treasurer  Deputy Treasurer					
11. Name of Treasurer or Deputy Treasurer					Address:
The Marine of Treasurer Copyrights					
Wiley Black		4E Cit	(407) 209 9. y:	16 State:	17. Zip Code:
14. Mailing Address:		1			34721
good pivile pic			cloud		
18. I have designated the following bank as my (check appropriate box). Primary Depository  Secondary Depository					
19. Name of Bank:		20. Address:   \( \frac{1898}{1898} \) \( \int \) \(			
South State Bank		22 Co	9898 F. LX/ unty:	23 State:	24. Zip Code:
21. City:				=/	3477/
		LHAVE READ THE FOREGOING FORM FO		FORM FOR THE API	POINTMENT OF THE
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.					
26. Signature of Candidate:					
25. Date: 01-05-24					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)					
I,do hereby accept the appointment designated above as:					
☐ Campaign Treasurer. ☐ Deputy Treasurer.					
29 Poto:					To Deputy Treasurer
01-05-LY			X		
DS-DF 9 (Fff. 10/23)					Rule 1S-2.001, F.A.C.