## 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 qualifying

**DS-DE 9 (Rev. 10/10)** 

SUPERVISOR OF ELECTIONS

2020 SEP 17 AM 11: 30

PALM BEACH COUNTY, FL

Rule 1S-2.0001, F.A.C.

officer before opening the campaign account.					OFFICE USE ONLY									
1. CHECK APPROPRIATE BOX(ES):														
☐ Initial Filing of Form	Re	-filing to Change:	X T	reasu	rer/Deputy	Z	Depo	sitory		Office		Party		
2. Name of Candidate (in		3. Address (include post office box or street, city, state, zip												
Rob, Long		code) 1780 Palm Cove Blvd, Unit 200, Delray Beach, FL												
4. Telephone	5. E-mail address					33445								
		roblong@gma	L	Ligupelate to: 2962 Calabria Way Delray Beach, FL 23445										
6. Office sought (include district, circuit, group number)  7. If a candidate for a <u>nonpartisan</u> office, check if										k if				
Palm Beach Soil & Water Conservation District, Grou					up 4 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 candidate.												
9. I have appointed the following person to act as my X Campaign Treasurer Deputy Treasurer														
10. Name of Treasurer or Deputy Treasurer Kim Leebove														
11. Mailing Address		12. Telephone												
9200 Belvedere Road, Suite 202 (561)689-9787														
13. City 14. County 15. State					00444					_				
West Palm Beach   Palm Beach   FL											@gmail.com			
18. I have designated the	< Pi	Primary Depository Secondary Depository												
					20. Address									
Wells Fargo					5849 Okeechobee Blvd.									
21. City 22. County			oh	23. State Florida						24. Zip Code				
West Palm Beach Palm Beach					33411									
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.														
A STATE OF THE STA					26. Signature of Sandidate									
9/17/20				X	X John									
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)														
ı, <u>Kim Leebove</u>							, do	hereb	у ассер	t the appo	intmen	it		
(Please Print or Type Name)														
designated above as:   Campaign Treasurer Deputy Treasurer.														
9/17/20 x Kim Leeggre														
Date				Signature of Campaign Treasurer or Deputy Treasurer										