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

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officer before opening the campaign account. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: Treasurer/Deputy Depository Initial Filing of Form 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip 3615 finecone Ct. Lando' Lakes, Fl 34639 4. Telephone -com 6. Office sought (include district, discuit, group number 7. If a candidate for a nonpartisan office, check if applicable: ommissioner 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 M' No Party Affiliation Party candidate. Write-In **Deputy Treasurer** 9. I have appointed the following person to act as my Campaign Treasurer 10. Name of Treasurer or Deputy Treasurer 11. Mailing Address 12. Telephone (813)40 13. City 15. State 16. Zip Code 17. E-mail address Secondary Depository 18. I have designated the following bank as my Primary Depository 19. Name of Bank 20. Address 24. Zip Code 23. State 22/\County 21. City 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 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. Limmer , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer Deputy Treasurer. designated above as:

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

Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 10/10)

Date