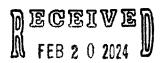
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

(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.



DECEIVED

N FEB 2 0 2024

BY: Depty 10 30 Am

OFFICE USE ONL

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) Sohnatha Bould Inchieur Chall				608 W	history	Mais	1 61	•	
			6	ode city	FL		•		
4. Telephone:	5. Candidate's Voter Registration #: 6. Email Address:								
(352) (129-606) (not required for qualifying purposes) John 1 char- (2) you (CALL		
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a nonpartisan office, check the boil if applicable:									
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									
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 Candid	date.	J				_ Party o	candidate.	
10. I have appointed the following person to act as my: 占Campaign Treasurer □ Deputy Treasurer									
11. Name of Treasurer or Deputy Treasurer:			12. Telephone: 13. Email Address:						
John when miller Children (32) 478 600 inha Charles on in									
14. Mailing Address: 15. City:					16. Sta	te:	17. Zir	Code:	
13608 Whisey leisy Dr. Day				+7	FL		33 2	. 25	
Tohorha helder Cheller (352) 478 606) John Charte fmiles 14. Mailing Address: 15. City: 16. State: J 17. Zip Code: 13665 Chisoy Joisy Dr. July City FL 3352T 18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository									
I 1U. Nama at Rank:			170 Address:						
21. City: 22.			38 1(14) Voc Vi of			of the	24 Zin Code:		
Date (IH		22. 00	Co		S-L		37(2)		
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									
25. Date: 2/20/2€24			X						
27. Treasurer's Acceptance of Appointment (fill in the blank, and check the appropriate box)									
I,							ove as:		
Campaign Treasurer.				☐ Deputy Treasurer.					
28. Date: て/2の/2074			29. Signature of Campaign Treasurer of Deputy Treasurer						
DS-DE 9 (Eff. 10/23)				//		ſ	Rule 1S-2	2.001, F.A.C.	