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

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

2022 FEB 10 PM4:26

(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):						
Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party						
2. Name of Candidate (in this order: First, Middle, Last) CAROL NADINE BOSTON 4. Telephone 5. E-mail address (850)4961919 BOSTON 45CHOLEROPED & BMAIL	3. Address (include post office box or street, city, state, zip code) 7136 EAST TONY TOND NAVARIE, FL 32566					
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if					
SCHOOL BOARD DISTRICT 3	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 Affiliation Party candidate.						
9. I have appointed the following person to act as my						
10. Name of Treasurer or Deputy Treasurer						
CAROL BOSTON	The state of the s					
11. Mailing Address	12. Telephone					
7136 EAST BAY BLUD.	(850)4466-1919					
13. City 14. County 15. State 16. Zip Code 17. E-mail address						
MAYERRE South Resp FL	2566 Bostovi 45chool Boars					
18. I have designated the following bank as my Primary Depository Secondary Depository						
19. Name of Bank	20. Address					
SAUTA ROSA COUNTY FEDERAL CREAT	4931 GULF DREETE PARKWAY					
21. City 22. County	23. State 24. Zip Code					
CILLY ISCEED SALINA IZE	50 FL 32563					
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					
10 FLORMARY 2022	x lengte					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)						
f,, do hereby accept the appointment (Please Print or Type Name)						
designated above as: Campaign Treasurer Deputy Treasurer.						
Date Signature of Campaign Treasurer or Deputy Treasurer						