## 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 officer before opening the campaign account

DS-DE 9 (Rev. 10/10)

SUPERVISOR OF ELECTIONS SARASOTA COUNTY FLORIDA

2022 MAR 25 AM 11: 43

FILED FOR RECORD SARASOTA COUNTY

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

officer before opening the campaign account.									OFFIC	E USE	ONLY
1. CHECK APPROPRIATE  Initial Filing of Form		E <b>S):</b> e-filing to Change	e: 🔲	Treas	surer/	Deputy [	Deposito	ry 🗀	Office		Party
Name of Candidate (in this order: First, Middle, Last)     James Welcome Meister					Address (include post office box or street, city, state, zip code)						
4. Telephone	5. E-mail address				7912 Osprey Hammock Court Sarasota, FL 34240						
( 941 ) 927-4789	kingsleey@aol.com				Ju	idoota, i E	J-12-10				
Office sought (Include district, circuit, group number)     Sarasota County Public Hospital Board     Northern District, Seat 1					7. If a candidate for a <u>nonpartisan</u> office, check if 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 X Republican 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  James W. Meister											
11. Mailing Address 7912 Osprey Hammock Court  12. Telephone ( 941 ) 927-4789											
13. City	14. County		15. State		16.	Zip Code	Code 17. E-mail address				
Sarasota	Sarasota		FL			34240	kingsleey@aol.com				
18. I have designated the following bank as my X Primary Depository Secondary Depository											
19. Name of Bank Wells Fargo					0. Address 5701 Bee Ridge Road						
21. City					23. State			24. Zip Code			
Sarasota	Sarasota					FL /			34240		
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 FACES TATED IN IT ARE TRUE.											
5. Date					26. Signature of Candidate						
3/25/2022				X		///	1/1/		1		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I, James W. Meister , do hereby accept the appointment											
(Please Print or Type Name)											
designated above as: X Campaign Treasurer Deputy Treasurer											
3/25/2022			X		1	111	11		/	V	
Date	Allege ett.		NE EL I	Sign	ature	of Campaig	n Freasyrer	or Deput	y Treasure	r	