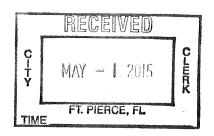
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying



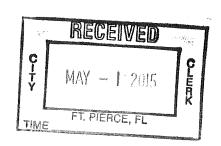
officer before opening the	<u>∍ campa</u>	ign account.								OFFIC	CE USE	ONLY	
1. CHECK APPROPRIATE Initial Filing of Form	•	S): e-filing to Change:	: 🔲 🤈	Treas	urer/l	Deputy [] Depos	sitor	ту 🗆	Office		Party	
2. Name of Candidate (in		3. Address (include post office box or street, city, state, zip							zip				
Linda Hudson						code) P.O. Box 3688							
4. Telephone	5. E-mail address				Fort Pierce, FL 34948								
(772) 940-6802	Linda@	@ReelectMayo											
6. Office sought (include o	listrict, ci	rcuit, group numb	per)		7. If a candidate for a <u>nonpartisan</u> office, check if								
Mayor, City of Fort Pierce						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 💢 Campaign Treasurer 🔲 Deputy Treasurer													
10. Name of Treasurer or Deputy Treasurer Kellie Shay Beebe													
11. Mailing Address		12. Telephone											
315 Avenue A		(772) 940-6802											
13. City		County	15. Sta		1	Zip Code 17. E-mail address							
Fort Pierce	St. Li	ucie	Florida	а	349	950	kellies	hay	y@gma	il.com			
18. I have designated the	followin	g bank as my	∑			ary Depositor	ry [<u> </u>	Seconda	ary Depos	itory		
19. Name of Bank				1	20. Address								
Harbor Community Bank 2						00 S. Indian River Dr.							
21. City	ı				23. State				24. Zip Code				
Fort Pierce St. Lucie					Florida 34950								
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.											R AND		
25. Date	26.	26. Signature of Candidate											
May 1, 2015	X	X Linda Hudson											
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
I, Kellie Shay Beebe					, do hereby accept the appointment								
(Please Print or Type Name)													
designated above as:	X	Campaign Tr	reasure	r		Deputy Trea	asurer.	100					
Date Signature of Campaign Treasurer or Deputy Treasurer													
Date				Olgin	aluic	, or Carripary	JII IJ GASU	21 G L	OI Depu	ty Heasu	101		

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

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OFFICE USE ONLY

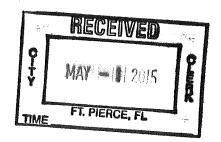
officer before opening the	campa	ign account.						OFFICE	: USE	ONLI		
1. CHECK APPROPRIATE Initial Filing of Form	•	6): -filing to Change:	X T	reasur	er/Deputy] Depository		Office		Party		
2. Name of Candidate (in t	r: First, Middle, L	3.	Address (includ	de post office b	oox or	street, city,	state,	zip				
Linda Hudson	co	code)										
		P.O. Box 3688										
4. Telephone	5. E-mail address					Fort Pierce, FL 34948						
(772) 940-6802	Linda@)ReelectMayo	rHuds	H	i							
6. Office sought (include d		7. If a candidate for a <u>nonpartisan</u> office, check if										
Mayor, City of Fort Pier		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 Campaign Treasurer 🔀 Deputy Treasurer												
10. Name of Treasurer or Deputy Treasurer Linda Hudson												
11. Mailing Address 12. Telephone												
315 Avenue A (772) 467-1246									46			
13. City	ate	16. Zip Code 17. E-mail address										
Fort Pierce	St. Lucie Florida				34950 lindahudsonbailey@yahoo.com							
18. I have designated the following bank as my					Primary Depository Secondary Depository							
19. Name of Bank	20. A	20. Address										
Harbor Community Bar		200 \$	00 S. Indian River Dr.									
21. City 22. County					23. State			24. Zip Code				
Fort Pierce	rt Pierce St. Lucie				Florida 34950							
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. S	26. Signature of Candidate									
May 1, 2015		X	X Lenda Hudson									
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I. Linda		, do hereby accept the appointment										
I, Linda Hudson, do hereby accept the appointment (Please Print or Type Name)												
designated above as: Campaign Treasurer 💢 Deputy Treasurer.												
Mayl	May 1, 2015 X Signature of Campaign Treasurer or Deputy Treasurer											
¹ Date S					Signature of Campaign Treasurer or Deputy Treasurer							

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

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OFFICE USE ONLY

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1. CHECK APPROPRIATE Initial Filing of Form	•	S): filing to Change:	: X T	reas	surer/[Deputy [D eposito	ory 🔲	Office		Party	
	in this order: First, Middle, Last) 3. Address (include post office box or street, city, st								state,	zip		
Linda Hudson		code)										
		P.O. Box 3688										
4. Telephone		ail address	مادياه	- 1	Fort Pierce, FL 34948							
	@ReelectMayo											
6. Office sought (include of		7. If a candidate for a <u>nonpartisan</u> office, check if										
Mayor,City of Fort Pier		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 Campaign Treasurer 💢 Deputy Treasurer												
10. Name of Treasurer or Deputy Treasurer John K. Bailey												
11. Mailing Address		12. Telephone										
315 Avenue A				(772) 467-1246								
13. City	- 1	County	15. Sta	ate	'							
Fort Pierce	St. L	ucie	FL		34950 lindahudsonbailey@yahoo.com						1	
18. I have designated the following bank as my												
19. Name of Bank		20. Address										
Harbor Community Bar	200	200 S. Indian River Dr.										
21. City	·					23. State			24. Zip Code			
Fort Pierce	St. Lucie Florida 34950											
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25. Date	26.	26. Signature of Candidate										
May 1, 2015	X	X Lindo Hudson										
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I, John K. Baile , do hereby accept the appointment (Please Print or Type Name)								t				
designated above as: Campaign Treasurer Deputy Treasurer.												
5/1/15 X /// /4												
Date					Signature of Campaign Treasurer or Deputy Treasurer							