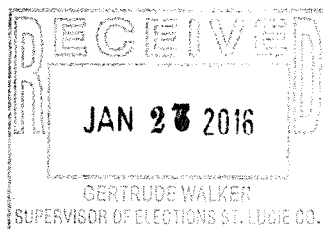


**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(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.



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)

Linda Bartz

3. Address (include post office box or street, city, state, zip code)

1334 SW Irving St.
Port St. Lucie, FL 34983

4. Telephone

(772) 812-3060

5. E-mail address

linda.b@gate.net

6. Office sought (include district, circuit, group number)

St Lucie Co. Commission, District 3

7. If a candidate for a nonpartisan 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 ☒ Democratic Party candidate.

9. I have appointed the following person to act as my ☒ Campaign Treasurer ☐ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Danrel J. Kurek

11. Mailing Address

2138 SE Herron Ave

12. Telephone

(772) 342-4230

13. City

Port St Lucie

14. County

St. Lucie

15. State

FL

16. Zip Code

34952

17. E-mail address

KurekDAX@ATT.net

18. I have designated the following bank as my

☐ Primary Depository

☐ Secondary Depository

19. Name of Bank

Seacoast Bank

20. Address

1901 US-1

21. City

Fort Pierce

22. County

St. Lucie

23. State

FL

24. Zip Code

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

1-27-16

26. Signature of Candidate

X Linda Bartz

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Danrel J. Kurek, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer

☐ Deputy Treasurer.

1/27/2016
Date

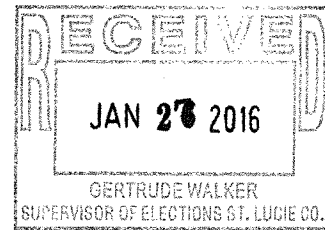
X

Signature of Campaign Treasurer or Deputy Treasurer

**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.

OFFICE USE ONLY

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☒ Initial Filing of Form Re-filing to Change: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

2. Name of Candidate (in this order: First, Middle, Last)

Linda Bartz

3. Address (include post office box or street, city, state, zip code)

1334 SW Irving St.
Port St. Lucie, FL 34983

4. Telephone

(772) 812-3060

5. E-mail address

lindab@gate.net

6. Office sought (include district, circuit, group number)

St. Lucie Co. Commision, District 3

7. If a candidate for a nonpartisan 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 ☒ Democratic 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 Bartz

11. Mailing Address

1334 SW Irving St.

12. Telephone

(772) 812-3060

13. City

PSC

14. County

St. Lucie

15. State

FL

16. Zip Code

34983

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21. City

FT Pierce

22. County

St. Lucie

23. State

FL

24. Zip Code

34950

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25. Date

1-27-16

26. Signature of Candidate

X Linda Bartz

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Linda Bartz, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

1-27-16

Date

X Linda Bartz

Signature of Campaign Treasurer or Deputy Treasurer