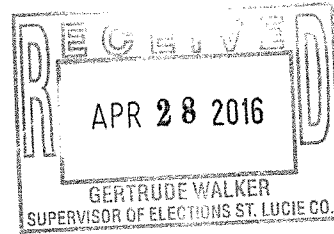


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**  
(Section 106.021(1), F.S.)



(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)

*Adam Locke*

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

*5655 S. Indian River Dr.  
Fort Pierce, FL 34982*

**4. Telephone**

*(772) 332-9707*

**5. E-mail address**

*adamzlocke@gmail.com*

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

*St. Lucie Co. Property Appraiser*

**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**

*Diane Marie Broder*

**11. Mailing Address**

*745 Altura St.*

**12. Telephone**

*(772) 529-6801*

**13. City**

*Port St. Lucie*

**14. County**

*St. Lucie*

**15. State**

*FL*

**16. Zip Code**

*34952*

**17. E-mail address**

*broderbookkeeping@yahoo.com*

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

*PNC - St. James Branch*

**20. Address**

*5493 NW St. James Dr.*

**21. City**

*Port St. Lucie*

**22. County**

*St. Lucie*

**23. State**

*FL*

**24. Zip Code**

*34983*

**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**

*4-28-16*

**26. Signature of Candidate**

*X [Signature]*

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

I, *Diane M. Broder*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

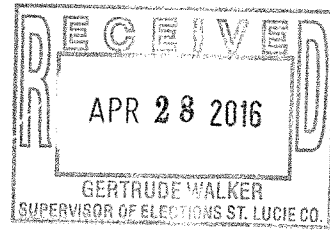
*4/28/16*  
Date

*X Diane M. Broder*  
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

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)

Adam Locke

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

5655 S. Indian River Dr.  
Fort Pierce, FL 34982

4. Telephone

(772) 332-9707

5. E-mail address

adam2locke@gmail.com

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

St Lucie County Property Appraiser

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

ADAM LOCKE

11. Mailing Address

5655 S. Indian River Dr.

12. Telephone

(772) 332-9707

13. City

Fort Pierce

14. County

St. Lucie

15. State

FL

16. Zip Code

34982

17. E-mail address

Adam2Locke@gmail.com

18. I have designated the following bank as my     Primary Depository     Secondary Depository

19. Name of Bank

PNC BANK - St James Branch

20. Address

5493 NW St. James Dr.

21. City

Port St Lucie

22. County

St Lucie

23. State

FL

24. Zip Code

34983

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

4-28-16

26. Signature of Candidate

X

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

I, Adam Locke, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

4-28-16

Date

X

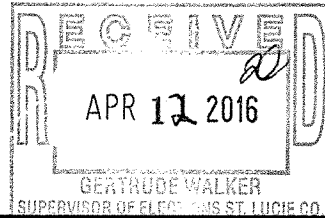
Signature of Campaign Treasurer or Deputy Treasurer

**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**

**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) *Adam Locke*  
**3. Address** (include post office box or street, city, state, zip code) *5655 S Indian River Drive Fort Pierce FL 34982*  
**4. Telephone** *(772)332-9707*      **5. E-mail address** *adamzlocke@gmail.com*

**6. Office sought** (include district, circuit, group number) *ST Lucie County Property Appraiser*  
**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**  
*Adam Locke*

**11. Mailing Address** *5655 S Indian River Drive*      **12. Telephone** *(772)332-9707*

**13. City** *Fort Pierce*    **14. County** *ST Lucie*    **15. State** *FL*    **16. Zip Code** *34982*    **17. E-mail address** *adamzlocke@gmail.com*

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank** *PNC Bank - ST James Branch*      **20. Address** *5493 NW ST James Drive*

**21. City** *Port St. Lucie*    **22. County** *ST Lucie*    **23. State** *FL*    **24. Zip Code** *34983*

**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** *4/12/16*      **26. Signature of Candidate**  
 *[Signature]*

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
 I, *Adam Locke*, do hereby accept the appointment  
 (Please Print or Type Name)  
 designated above as:  Campaign Treasurer     Deputy Treasurer.  
*4/12/16*      *[Signature]*  
 Date      Signature of Campaign Treasurer or Deputy Treasurer