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.

RECEIVED
MAY 31 2016
CITY CLERK'S OFFICE

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)	3. Address (include post office box or street, city, state, zip code)
Lisa Maria Fabnacht	1105 Seaway Dr unit c Ft Pierce FL 34949
4. Telephone: (772) 216-2820	5. E-mail address: lisafabnacht777@gmail.com

6. **Office sought** (include district, circuit, group number)	7. **If a candidate for a nonpartisan office, check if applicable:**
Fort Pierce City Commission District 2	☐ 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: Lisa Fabnacht

11. Mailing Address	12. Telephone
1105 Seaway Dr Unit C	(772) 216 2820

13. City	14. County	15. State	16. Zip Code	17. E-mail address
Ft Pierce	St Lucie	FL	34949	lisafabnacht777@gmail.com

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

19. Name of Bank	20. Address
Oculina Bank	1100 Colonnades Dr

21. City	22. County	23. State	24. Zip Code
Ft Pierce	St Lucie	Ft Pierce FL	34949

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
5/31/16	X [signature]

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

I, Lisa Fabnacht, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

5/31/16
Date

X [signature]
Signature of Campaign Treasurer or Deputy Treasurer