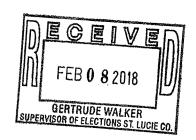
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

(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: X Treasurer/Deputy Depository Defice Party | | | | | | | | | | | | |
| 2. Name of Candidate (in this order: First, Middle, Last) | | | | | | 3. Address (include post office box or street, city, state, zip | | | | | | |
| Daniel John Kurek | | | | | code) | | | | | | | |
| 4. Telephone | 5. E-mail address | | | | _2138 SE Herron Ave. Port St Lucie, FL 34952 | | | | | | | |
| (772) 342-4230 | dan@kurekforslclucie.com | | | | | | | | | | | |
| 6. Office sought (include district, circuit, group number) | | | | | | 7. If a candidate for a <u>nonpartisan</u> office, check if | | | | | | |
| St Lucie County Commissioner District 2 | | | | | 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 ☒ <u>Republican</u> Party candidate. | | | | | | | | | | | | |
| 9. I have appointed the following person to act as my Campaign Treasurer 🔀 Deputy Treasurer | | | | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer Fran Sargalski | | | | | | | | | | | | |
| 11. Mailing Address | | | | | | 12. Telephone | | | | | | |
| 2138 SE Herron Ave. | | | | | | (203) 530-8160 | | | | | | |
| 13. City | 14. County | | | ate | 16. Zip Code 17. E-mail address | | | | | | | |
| Port St Lucie | St. Lucie FL | | | | 34952 fran@kurekforslclucie.com | | | | | | | |
| 18. I have designated the following bank as my | | | | | | | | | | | | |
| 19. Name of Bank 2 | | | | | 0. Address | | | | | | | |
| Wells Fargo Bank 95 | | | | | 520 S US HWY 1 | | | | | | | |
| 21. City 22. County | | | | | 23. State | | | | 24. Zip Code | | | |
| Port St Lucie | ort St Lucie St. Lucie | | | and of the second second second second | Florida | | | | 34952 | | | |
| 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 | | | | | | 6. Signature of Candidate | | | | | | |
| 02/07/2018 X | | | | | | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | | | |
| ı, Fran Sargalski | | | | | , do hereby accept the appointment | | | | | | | |
| (Please Print or Type Name) | | | | | | | | | | | | |
| designated above as: Campaign Treasurer Deputy Treasurer. | | | | | | | | | | | | |
| 2/7/2018 X Flow Dargalshi | | | | | | | | | | | | |
| Date | | | | Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | | |