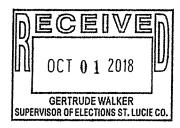
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying



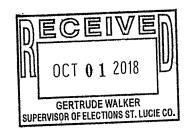
officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
☑ Initial Filing of Form Re-filing to Change: ☐ 1	Treasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
7 wend dyn McLeod 4. Telephone G.M. 5. E-mail address	code) 3015 W. Dipie Blvd
4. Telephone G.M. 5. E-mail address	Fort Pierce Fl. 34946
772-494-1989 ancleo 2004@hetrail.c	con
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
County Commissioner District 1	applicable: My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> 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	Ω
Oliver	Drown
11. Mailing Address	12. Telephone
	Drive (917) 501-6005
Port Saint Lucie Saint Lucie Fl	ate 16. Zip Code 17. E-mail address 34953 Obriuntaxes@gmail.com
18. I have designated the following bank as my	;
19. Name of Bank	20. Address
K15 & 1	10585 S. USZ
21. City 22. County	23. State 24. Zip Code
loaf St. Lucie Saint Lucie	2 FC. 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. Signature of Candidate
10/1/18	X Guendolen Mchead
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
1, Oliver Brown	, do hereby accept the appointment
(Please Print or Type Name)	
designated above as: Campaign Treasurer Deputy Treasurer.	
10 18 X	pliver Brown
Date	Signature of Campaign Treasurer or Deputy Treasurer

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

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☐ Write-In ☐ No Party Affiliation ☑ ☐ ☐	Party candidate.	
9. I have appointed the following person to act as my Campaign Treasurer V Deputy Treasurer		
10. Name of Treasurer or Deputy Treasurer Gwentoly McLed		
11. Mailing Address 12. Telephone		
3015 W. Diple Blud	(772)940-1632	
13. City 14. County 15. State 16. Zip Code 17. E-mail address Fort Pierce St. Lucie FL, 34996 anclead Looy @ hatmail.com		
18. I have designated the following bank as my		
19. Name of Bank	20. Address 10585	
21. Gity 22. County Post Saint Lucie St. Lucie	23. State 24. Zip Code 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. Signature of Candidate	
1011/2018	X Guerdoly 7/chend	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)		
I,, do hereby accept the appointment (Please Print of Type Name)		
designated above as: Campaign Treasurer Deputy Treasurer.		
10/i/2018 X	Signature of Campaign Treasurer or Deputy Treasurer	