

**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) *Michelle Renee Miller*      3. Address (include post office box or street, city, state, zip code) *5051 N. Hwy A1A, 16-5 Ft Pierce FL 34949*

4. Telephone *(772) 370 5288*      5. E-mail address *Myshell2307@gmail.com*

6. Office sought (include district, circuit, group number) *Clerk of Court*      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     *Republican* Party candidate.

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

10. Name of Treasurer or Deputy Treasurer *Michelle Miller*

11. Mailing Address *5051 N Highway A1A 16-5*      12. Telephone *(772) 370 5288*

13. City *Fort Pierce*    14. County *St Lucie*    15. State *FL*    16. Zip Code *34949*    17. E-mail address *myshell2307@gmail.com*

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

19. Name of Bank *SYNOVUS*      20. Address *2500 Virginia Ave*

21. City *Fort Pierce*    22. County *ST Lucie*    23. State *FLORIDA*    24. Zip Code *34981*

**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 *8/27/2019*      26. Signature of Candidate *[Signature]*

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

I, *Michelle Miller*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.  
*8/27/2019*      *[Signature]*  
Date      Signature of Campaign Treasurer or Deputy Treasurer