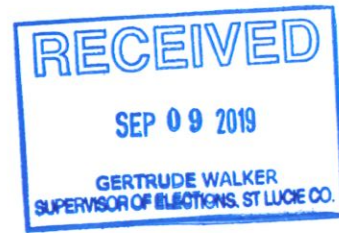


**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)



(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. Highway A1A, 16-5
Fort Pierce, Florida, 34949

4. Telephone
(772) 370-5288

5. E-mail address
Myshell2307@gmail.com

6. Office sought (include district, circuit, group number)
St. Lucie County 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
Christine Neese

11. Mailing Address
2801 Sunrise Blvd

12. Telephone
(772) 418-9199

13. City Fort Pierce **14. County** St. Lucie **15. State** FL **16. Zip Code** 34982 **17. E-mail address** neesecrew@yahoo.com

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

19. Name of Bank
Seacoast National Bank

20. Address
1901 South US #1

21. City Fort Pierce **22. County** St. Lucie **23. State** Florida **24. Zip Code** 34950

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 9/9/19 **26. Signature of Candidate**

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

I, Christine Neese, do hereby accept the appointment
 (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

9/9/19 **X**
 Date Signature of Campaign Treasurer or Deputy Treasurer