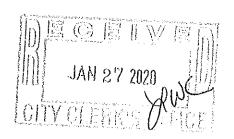
## APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(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.



officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
	reasurer/Deputy Depository Defice Party
2. Name of Candidate (in this order: First, Middle, Last)  (AAV(PS (PAVET   + AYLIN, 4. Telephone   5. E-mail address  (772) 924-9205   Patt CABCE  241 60 6 may 1.	3. Address (include post office box or street, city, state, zip code)
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if 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	
10. Name of Treasurer or Deputy Treasurer  AACLES C. (-A-//C.)	
11. Mailing Address	12. Telephone
(8/5 M. (7) St. Ft. Pluce, Fl (1)	
13. City 14. County 15. Sta It Pierco St. Lucic F	16. Zip Códe 17. E-mail address  RDHLABCK7410 Comail
18. I have designated the following bank as my	Primary Depository Secondary Depository
19. Name of Bank Couling	20. Address 60 Delaware Ave
21. City Prece 22. County St. Luci	23. State 24. Zip Code 34. Zip Code
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 / Mu, 27, 2020	X / Carlidate / Carlin / 14
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. (Please Print or Type Name), do hereby accept the appointment	
designated above as: Campaign Treasurer Deputy Treasurer.	
/ - 2-7 - 2 d <b>X</b> /	Signature of Campaign/Treasurer of Deputy Treasurer