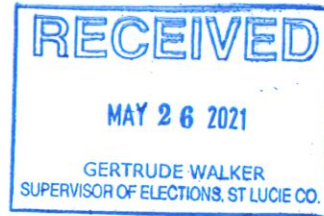


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(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)  
FRITZ MASSON ALEXANDRE

**3. Address** (include post office box or street, city, state, zip code)

**4. Telephone**  
(321 ) 888-1371

**5. E-mail address**  
FRITZALEX@YAHOO.COM

1302 SW PAAR DRIVE  
PORT SAINT LUCIE, FLORIDA 34953

**6. Office sought** (include district, circuit, group number)  
CITY COUNCIL, DISTRICT 3

**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     \_\_\_\_\_ N/A \_\_\_\_\_ Party candidate.

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

**10. Name of Treasurer or Deputy Treasurer**  
FRITZ MASSON ALEXANDRE

**11. Mailing Address**  
1302 SW PAAR DRIVE

**12. Telephone**  
( 786 ) 282-7826

**13. City** PORT SAINT LUCIE    **14. County** SAINT LUCIE    **15. State** FLORIDA    **16. Zip Code** 34953    **17. E-mail address** esther.saintfort@yahoo.com

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

**19. Name of Bank** ITHING FINANCIAL    **20. Address** 2100 NW COURTYARD CIRCLE

**21. City** PORT SAINT LUCIE    **22. County** SAINT LUCIE    **23. State** FLORIDA    **24. Zip Code** 34953

**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** 05/26/2021    **26. Signature of Candidate** X

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
I, FRITZ MASSON ALEXANDRE, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.  
05/26/2021    X      
Date    Signature of Campaign Treasurer or Deputy Treasurer