

JUL 5 '21 AM 9:24

# **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, FL 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    ☐ \_\_\_\_\_ Party candidate.

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

**10. Name of Treasurer or Deputy Treasurer**  
**ESTHER SAINT-FORT**

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

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

**13. City**  
**PORT SAINT LUCIE**

**14. County**  
**SAINT LUCIE**

**15. State**  
**FL**

**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**  
**ITHINK FINANCIAL**

**20. Address**  
**2100 NW COURTYARD CIRCLE**

**21. City**  
**PORT SAINT LUCIE**

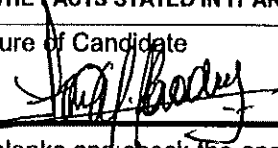
**22. County**  
**SAINT LUCIE**

**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**  
**07/02/2021**

**26. Signature of Candidate**  
**X** 

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

designated above as: ☒ Campaign Treasurer    ☐ Deputy Treasurer.

**07/02/2021**  
Date

**X**   
Signature of Campaign Treasurer or Deputy Treasurer