

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

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

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	GERTRUDE WALKER SUPERVISOR OF ELECTIONS, ST LUCIE CO.

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)	3. Address (include post office box or street, city, state, zip		
Tavaris hilliams	code) 12/6/ SW Oaknater Court		
4. Telephone 5. E-mail address	Bort St. L-rie, FL. 34987		
(SL) 1460-3240 tavaris 3/60) gmail . con			
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if			
District 3	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 Affitiation ☐Party candidate.			
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer			
10. Name of Treasurer or Deputy Treasurer			
Tavaris Williams			
11. Mailing Address 12. Telephone			
12/6/ Sh Ogkwater Court 13. City 14. County 15. State 16. Zip Code 17. E-mail address 18. City 19.			
13. City 14. County 15. State 16. Zip Code 17. E-mail address Part St. Lucie Saint Lucie FL 34987 Tayacis 31/20 amoil can			
Part St. Lucie Saint Lucia FL 34987 tavaris 7/12 Dangil. con			
18. I have designated the following bank as my Primary Depository Secondary Depository			
19. Name of Bank 20. Address			
Sun Coast			
21. City 22. County	23. State 24. Zip Code		
Port St. Lucie Saint Lucie	FL. 3487		
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 26. Signature of Candidate			
7/9/2021 X	2 the		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)			
I, Tavaris Williams , do hereby accept the appointment (Please Print or Type Name)			
designated above as: Deputy Treasurer Deputy Treasurer.			
7/9/2021 X 1 3/2			
	mature of Campaign Treasurer or Deputy Treasurer 19 12:1		