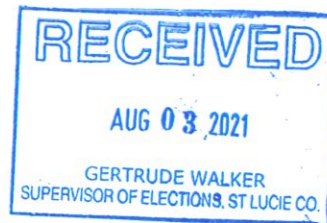


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(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)

*Stephanie Morgan*

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

*6575 NW Pomona Ct.  
Port St. Lucie, FL 34983*

**4. Telephone**

*(772) 528-9199*

**5. E-mail address**

*MoreWithMorgan@gmail.com*

**6. Office sought** (Include district, circuit, group number)

*PSL City Council, District 1*

**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**

*Stephanie Morgan*

**11. Mailing Address**

*6575 NW Pomona Ct*

**12. Telephone**

*(772) 528-9199*

**13. City**

*Port St. Lucie*

**14. County**

*St. Lucie*

**15. State**

*FL*

**16. Zip Code**

*34983*

**17. E-mail address**

*MoreWithMorgan@gmail.com*

**18. I have designated the following bank as my**

☒ Primary Depository    ☐ Secondary Depository

**19. Name of Bank**

*MidFlorida Credit Union*

**20. Address**

*771 St. Lucie West Blvd.*

**21. City**

*Port St. Lucie*

**22. County**

*St. Lucie*

**23. State**

*FL*

**24. Zip Code**

*34986*

**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**

*8.3.21*

**26. Signature of Candidate**

*X Stephanie Morgan*

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

I, *Stephanie Morgan*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer    ☐ Deputy Treasurer.

*8.3.21*

Date

*X Stephanie Morgan*

Signature of Campaign Treasurer or Deputy Treasurer