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	: 🔲 Т	reas	urer/Deput	ty 🗀	Deposito	ory 🔲	Office		Party		
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip								
ARNDREA DAMPIER					code) P O Box 4442								
4. Telephone 5. E-mail address					Fort Pierce, FL 34948								
(772)	arndrea4d5@gmail.com												
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if								
St Lucie County School Board Member District 5					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 No Party Affiliation 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													
Arndrea Dampier Deputy Treasurer													
11. Mailing Address		12. Telephone											
P O BOX 4442					(772) 410-4556								
13. City	14. County		15. State			6. Zip Code 17. E-mail address							
Ft. Pierce St. Lucie FL				34948 arndrea4d5@gamil.com									
18. I have designated the following bank as my													
19. Name of Bank		20. Address											
					501 Orange Avenue								
21. City		22. County			1 000000000	State			24. Zip Co	ode			
Ft. Pierce		St. County			FL				34950				
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. Sjgnature of Candidate								
5/13/2022	2022				x Chridrea Damp								
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
I, Arndrea Dampier					, do hereby accept the appointment								
(Please Print or Type Name)													
designated above as: Campaign Treasurer Deputy Treasurer.													
5/13/2022 X (bridge Dampier)													
Date				Signature of Campaign Treasurer or Deputy Treasurer									