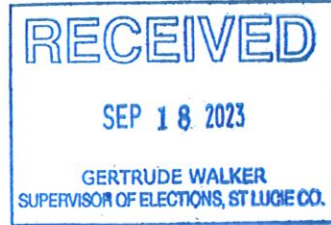


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(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)

*Cathy Townsend*

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

*431 Torpey Rd  
Ft Pierce FL 34946*

**4. Telephone**

*(772) 201-5503*

**5. E-mail address**

*Harborsidecathys@comcast.net*

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

*County Commissioners District 5*

**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     Republican Party candidate.

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

**10. Name of Treasurer or Deputy Treasurer**

*Cathy Townsend*

**11. Mailing Address**

*431 Torpey Rd*

**12. Telephone**

*(772) 201-5503*

**13. City**

*FP*

**14. County**

*St Lucie*

**15. State**

*FL*

**16. Zip Code**

*34946*

**17. E-mail address**

*Harborsidecathys@comcast.net*

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

**19. Name of Bank**

*South State*

**20. Address**

*5001 Okeechobee Rd*

**21. City**

*FP*

**22. County**

*St Lucie*

**23. State**

*FL*

**24. Zip Code**

*34947*

**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**

*9/18/23*

**26. Signature of Candidate**

*X Cathy Townsend*

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

I, *Cathy Townsend*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

*9/18/23*

Date

*X Cathy Townsend*

Signature of Campaign Treasurer or Deputy Treasurer