## 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 filing 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 PO Box or Street, City, State, Zip Code):								
(Please Print or Type Name)  John Joseph Heaning			4351 Winding Place					
John Joseph Fleaning			Fort Pierce, Florida, 34981					
4. Telephone:	5. Candidate's Voter Registration #: 6. Email Address:							
(772 ) 834-4677	108201421 (not required for qualifying purpose			。。 │VoteJohnHeaning@gmail.com│				
7. Office Sought (include district, circuit, group, or seat #):				8. If a candidate for a <u>nonpartisan</u> office, check the box				
Fort Pierce City Commissioner District 2 Seat 2 if applicable:								
9. If a candidate for <u>partisan</u> office, check the box and fill in the name of the party as applicable: I intend to run as a								
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐ Party candidate.								
10. I have appointed the following person to act as my:   Campaign Treasurer Deputy Treasurer								
11. Name of Treasurer or Deputy Treasurer:			12. Telephone: 1			13. Email	13. Email Address:	
Sydney Leibman			(772 ) 263-2926 Slieb1019@aol.com					
14. Mailing Address:					6. State: 17. Zip Code:			
632 NE Muskrat Run		Port St Lucie		е	FL		34983	
18. I have designated the following bank as my (check appropriate box): I Primary Depository Secondary Depository								
19. Name of Bank:			20. Address:					
Seacoast Bank  21. City:  22. Co			1901 S Hwy 1 unty:   23. State:   24. Zip Code:					
Fort Pierce		St Luc			FL		34983	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.								
			26. Signature of Candidate:					
25. Date: 17 April 2024		X Con lean						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
Sudnov Liebman								
I, Sydney Liebmando hereby accept the appointment designated above as:  (Please Print or Type Name)						nated above as:		
■ Campaign Treasurer. □ Deputy Treasurer.								
28. Date: 17 April 2024			29. Signature of Campaign Treasurer or Deputy Treasurer					
			X					
DS-DE 9 (Rev. 09/23)							In 15-2 0001 E A C	