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: □ Treasure					pository			
2. Name of Candidate (in this order: First, Middle, Last):			3. Address (include PO Box or Street, City, State, Zip Code): 7907 Lakeside way, Fort Pierce, Florida, 34951					
(Please Print or Type Name) Nathaniel Isaac Zajac			7907	Lakeside w	ay, Foi	t Pierce, Fi	onda, 34951	
4. Telephone:	5. Candidate's Voter Registration			ion #: 6. Email Address:				
(772) 224-0127	127276279 (not required for qualifying purposes) Nath				niel.	Zajac@	nggmail.com	
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a <u>nonpartisan</u> office, check the						office, check the box		
School Board District 1 if applicable: □ I intend to run as a Write-In Candidate.						date.		
9. If a candidate for partisan 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:						13. Email		
Kenneth Leedham			(772) 370-2800 Ken.Leedham@gmail.com					
14. Mailing Address:		15. Cit	5	•	16. St	ate:	17. Zip Code:	
3092 Sw Circle St		Port ST Lucie		ie 	FL		34953	
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository								
19. Name of Bank:			20. Address:					
Seacoast Bank 21. City: 22. Cou				US Hwy	1 23. St	nto:	24. Zip Code:	
Fort Pierce		St Luc			FI		34950	
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 D				26. Signature of Candidate:				
7-18-2024 25. Date:			V ATTILL TO O					
			<u> </u>	UNUU	W.	DMC_	,	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
Ken Leedham do hereby accept the appointment designated above as:								
do hereby accept the appointment designated above as: (Please Print or Type Name)								
■ Campaign Treasurer.				☐ Deputy Treasurer.				
7-18-2024			29. Si	29. Signature of Campaign Treasurer or Deputy Treasurer				
28. Date:			X (
DS-DE 9 (Rev. 09/23)			1			Ru	le 1S-2.0001, F.A.C.	