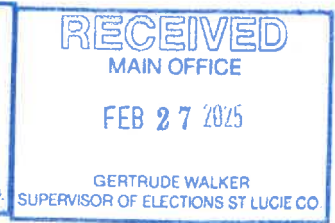
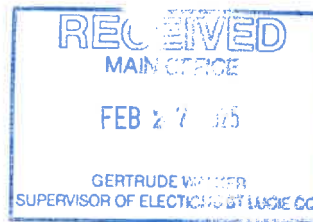


**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(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):
(Please Print or Type Name)

Larry Leet

3. Address (include PO Box or Street, City, State, Zip Code):

3100 SE Pruitt Rd
E-306
Port St. Lucie, FL. 34952

4. Telephone:

(772) 216-4558

5. Candidate's Voter Registration #:

108281415

(not required for qualifying purposes)

6. Email Address:

lleet@att.net

7. Office Sought (include district, circuit, group, or seat #):

BOCC District 2

8. If a candidate for a nonpartisan office, check the box if applicable:

☐ I intend to run as a Write-In Candidate.

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. ☒ Republican Party candidate.

10. I have appointed the following person to act as my:

☒ Campaign Treasurer

☐ Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Larry Leet

12. Telephone:

(772) 216-4558

13. Email Address:

lleet@att.net

14. Mailing Address:

3100 SE Pruitt Rd. E-306

15. City:

Port St. Lucie

16. State:

Florida

17. Zip Code:

34952

18. I have designated the following bank as my (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

19. Name of Bank:

TRUST
FT Pierce

20. Address:

700 Virginia Ave

21. City:

FT Pierce

22. County:

St. Lucie

23. State:

FL

24. Zip Code:

34982

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.

25. Date: 02/27/2025

26. Signature of Candidate:

X

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

I, Larry Leet do hereby accept the appointment designated above as:

(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date: 02/27/2025

29. Signature of Campaign Treasurer or Deputy Treasurer

X