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

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officer before opening the campaign account.									OFFICI	EUSE	ONLY
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Tile T						eputy] Deposito	ry 🔲	Office		Party
Name of Candidate (in this order: First, Middle, Last) Maggie Kostka					Address (include post office box or street, city, state, zip code) 570 A1A Beach Blvd						
4. Telephone	5. E-mail address				St. Augustine Beach, FL 32080						
(904) 669-5132	magkostka@yahoo.com										
6. Office sought (include district, circuit, group number) SAB Cammission scat \					7. If a candidate for a <u>nonpartisan</u> 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 Party candidate.											
9. I have appointed the following person to act as my											
10. Name of Treasurer or Deputy Treasurer Cash Kostka											
11. Mailing Address 12. Telephone										ALEMANIE DAS ACTIONNESS PROPERTIES	
570 A1A Beach Blvd (904) 826-7548											
13. City	14. County 1		15. State		16. Zip Code		17. E-mail address				
St Augustine Beach	St Johns		FL		32080 cashkostka@gmail.com						
18. I have designated the following bank as my					Primary Depository Secondary Depository						
19. Name of Bank Ameris Bank					20. Address 3572 A1A South						
21. City 22. County				***************************************		23. State			24. Zip Code		
St. Augustine Beach St. Johns				l FL					32080		
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. Signature of Candidate						
5/22/20				x Muga Kooth							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
ı,Cash Kostka					, do hereby accept the appointment						
(Please Print or Type Name)											
designated above as: Campaign Treasurer Deputy Treasurer.											
3/27/20 X CM											
Date Signature of Campaign Treasurer or Deputy Treasurer											