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.

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OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository ☐ Office ☐ Partv 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) 353 TavIstock Dr St Augustine Fr 32095 4. Telephone 5. E-mail address (480)6885064 annoltaylorogmalism 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: board Dist 5 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 candidate. Party 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer 11. Mailing Address 12. Telephone 480,6885064 13. City 14. County 15. State 16. Zip Code 17. E-mail address 18. I have designated the following bank as my Primary Depository Secondary Depository 20. Address 19. Name of Bank 919 23. State 21. City 22. County 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 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. Taylor (Please Print or Type Name) , do hereby accept the appointment Campaign Treasurer. designated above as: Deputy Treasurer. Χ Signature of Campaign Treasurer or Deputy Treasurer