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YTHUOD GHMCL F3

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.

officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
Initial Filing of Form Re-filing to Change:	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last) 4. Telephone 5. E-mail address Tclon ton 4. FSUL 965	3. Address (include post office box or street eity, state, zip code)
6. Office sought (include district, circuit, group number) School Bard District 2	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 <u>partisan</u> office, check block and fil	Il 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	Campaign Treasurer Deputy Treasurer
10. Name of Treasurer or Deputy Treasurer Anthony EUL'S Weman	SIL
11 Mailing Address	12 Telephone
	17. E-mail address tony, FSM 1965@Icland. Com
18. I have designated the following bank as my	Primary Depository Secondary Depository
19 Name of Bank ADITAL CITY	20. Address MAIN St
HASTINGS 22. County 5) Johns	23 State 24. Zip Code 32 (45
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 10-3-23	26. Signature of Candidate So
27. Treasurer's Acceptance of Appointmen	nt (fill in the blanks and check the appropriate block)
1. Anthony Ellis Coleman S. (Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasurer.	Deputy Treasurer.
15-3-23 X	Signature of Campaign Treasurer or Deputy Treasurer