## **\PPOINTMENT OF CAMPAIGN TREASURER** AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)



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)     Edward   William   day   Vr.     4. Telephone   5. E-mail address     6. Office sought (include district, circuit, group number)   7. If a candidate for a nonpartisan 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 candidate.   1. Name of Treasurer of Deputy Treasurer   Deputy Treasurer     10. Name of Treasurer of Deputy Treasurer   Deputy Treasurer     11. Mailing Address   Y 2 1 85	officer before opening the campaign account.	OFFICE USE ONLY
2. Name of Candidate (in this order: First, Middle, Last)  Edward William decilve.  4. Telephone  (3 % ) 965-5287   S. E-mail address   edandfara Dwindstram.net   Line Oak, FC 3 20 60  6. Office sought (include district, circuit, group number)   S. E-mail address   Line Oak, FC 3 20 60  6. Office sought (include district, circuit, group number)   S. E-mail address   Line Oak, FC 3 20 60  6. Office sought (include district, circuit, group number)   S. E-mail address   Line Oak, FC 3 20 60  6. Office sought (include district, circuit, group number)   S. E-mail address   My intent is to run as a Write-in candidate.  8. If a candidate for a nonpartisan office, check if applicable: My intent is to run as a Write-in candidate.  9. Name of Treasurer or Deputy Treasurer  10. Name of Treasurer or Deputy Treasurer  11. Mailing Address   Lize Telephone	1 <u> </u>	
Edward William daylve.  4. Telephone  (356) 965-5287   S. E-mail address   S. E-mail address   Edward trans windstram.net   Liw Oak, FC32060    6. Office sought (include district, circuit, group number)   T. If a candidate for a nonpartisan 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 Affillation   Party candidate.  10. Name of Treasurer of Deputy Treasuren   Deputy Treasurer   Deputy Treasurer     Deputy Treasurer   Deputy Treasurer   Deputy Treasurer     Deputy Treasurer   Deputy Treasurer   Deputy Treasurer     11. Mailing Address   Y21   STA RAD   RAD	☑ Initial Filing of Form Re-filing to Change: ☐ Tre	easurer/Deputy Depository Office Party
4. Telephone  (3 Fe ) 965 - 528   edandtarn windstram net   Liw Oak, FC 3286  6. Office sought (include district, circuit, group number)   T. If a candidate for a nonpartisan 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 candidate.    No Party Affillation   Party candidate.   I have appointed the following person to act as my   Campaign Treasurer   Deputy Treasurer     10. Name of Treasurer or Deputy Freasurer   Deputy Freasurer     12. Telephone   (3 Fe ) 965 - 5287     13. City	I A 6 12 1 A	l anda)
(386) 965-5287   edand from windstream net   Line Oak, FC32060   6. Office sought (include district, circuit, group number)   7. If a candidate for a nonpartisan 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 candidate.  9. Write-In   No Party Affiliation   Party candidate.  10. Name of Treasurer of Deputy Treasurer   Deputy Treasurer   Deputy Treasurer   11. Mailing Address   12. Telephone   (386) 965-5287   13. City   City   Dak   Swannel   FC   Sub   Cland for a Windstream net   18. I have designated the following bank as my   Primary Depository   Secondary Depository   19. Name of Bank   Swannel   Credit   Villate		1 5000 4821 85th Road
6. Office sought (include district, circuit, group number)    Charle   Char		1: 0 / (2200
School   Brand   District		net Live Vak, FL sales
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	School Board District 4	
I have appointed the following person to act as my   Campaign Treasurer   Deputy Treasurer		
10. Name of Treasurer or Deputy Treasurer  Edward and The  11. Mailing Address  (3FC) 965-5267  13. City  14. County  15. State  16. Zip Code  17. E-mail address  Cod Number Penalties of Perjury, I Declare That I Have Read The Foregoing Form For appointment of Campaign Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  17. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  18. Name of Bank  Swannel River Federal Credit Valie 20. Address  20. Address  20. Address  20. State  22. County  23. State  24. Zip Code  32. Dete  26. Signature of Candidate  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. Edward das Wee  3. Ochereby accept the appointment	Write-In No Party Affiliation	Party candidate.
11. Mailing Address  4721 85th Rd  12. Telephone  (3FC) 965-5287  13. City  Cive Oalc Swannel FC 3200 17. E-mail address  Cive Oalc Swannel FC 3200 edand taa Qwindstram.net  18. I have designated the following bank as my  Primary Depository Secondary Depository  19. Name of Bank  Swannel River Federal Credit Vair 20. Address  20. Address  21. City  22. County  23. State  24. Zip Code  32064  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  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. Edward Lasswa designation of campaign ment (fill in the blanks and check the appropriate block)  1. do hereby accept the appointment	I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
13. City  14. County  15. State  16. Zip Code  17. E-mail address  18. I have designated the following bank as my  19. Name of Bank  Swannee River Federal Credit Variation  20. Address  20. Address  21. City  22. County  23. State  24. Zip Code  32. D49  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  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. City Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. City Acceptance of Appointment (fill in the blanks and check the appropriate block)  26. SignatOre of Candidate  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. City Acceptance of Appointment (fill in the blanks and check the appointment)		
13. City  Live Oak  Swannel  15. State  16. Zip Code  17. E-mail address  18. I have designated the following bank as my  Primary Depository  19. Name of Bank  Swannel  River Federal Credit Valo  20. Address  20. Address  20. Address  21. City  22. County  23. State  Parimary Depository  24. Zip Code  32064  Under Penalties of Perjury, I Declare that I have read the foregoing form for appointment of campaign treasurer and that the facts stated in it are true.  25. Date  26. Signature of Candidate  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  Lawrel	I 11 Mailing Addrage .	12. Telephone
13. City  Live Oak  Swannel  15. State  16. Zip Code  17. E-mail address  18. I have designated the following bank as my  Primary Depository  19. Name of Bank  Swannel  River Federal Credit Valo  20. Address  20. Address  20. Address  21. City  22. County  23. State  Parimary Depository  24. Zip Code  32064  Under Penalties of Perjury, I Declare that I have read the foregoing form for appointment of campaign treasurer and that the facts stated in it are true.  25. Date  26. Signature of Candidate  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  Lawrel	4821 85 Md	(386) 965-5287
19. Name of Bank Swannel River Federal Credit Valo 20. Address 203 Cnewood Way  21. City.  22. County 23. State 24. Zip Code 32064  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 26. Signature of Candidate 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1. City 20. Address 224. Zip Code 32064  24. Zip Code 32064  25. Date 26. Signature of Candidate 26. Signature of Candidate 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  27. do hereby accept the appointment	12 City 14 County 15 State	
Surannel River federal Credit Union 203 (Interest Way Way 21. City).  21. City.  22. County  23. State  24. Zip Code  32064  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  X		
21. City 22. County 23. State 24. Zip Code 32064  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 X (fill in the blanks and check the appropriate block)  1. Edward Lawre 22. County 23. State 24. Zip Code 32064  24. Zip Code 32064  25. Date 15. Date 26. Signature of Candidate X (fill in the blanks and check the appropriate block)  26. Signature of Candidate X (fill in the blanks and check the appropriate block)  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appointment)		
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  X  Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1, Edward Lawrence of Lawre		203 Kinewood Way JW
25. Date  26. Signature of Candidate  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1, Cavard das we do hereby accept the appointment		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  1, Edward das was given and check the appropriate block)		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  I,	25. Date , ) 2	26. Signatûre of ¢andidate, / /
I, Edward das Wer , do hereby accept the appointment	2/15/22	x Clml doil
	27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
/Polaris - Polaris - Polaris - Alice - A		
(Please Print or Type Name)		
signated above as: Campaign Treasurer Deputy Treasurer.		
2/15/22 X Signature of Campaior Treasurer or Deputy Treasurer		Signature of Campaids Transurer or Donuty Transurer