

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

APR 16 2024

OFFICE OF THE CITY CLERK

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)

Laurie Kay Christy

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

131 University Blvd, Daytona Beach, FL 32118

4. Telephone:
(386) 278-0403

5. Candidate's Voter Registration #: 129411520
(not required for qualifying purposes)

6. Email Address:
laurie@lauriechristy.com

7. Office Sought (include district, circuit, group, or seat #):
City Commissioner Zone 2

8. If a candidate for a nonpartisan office, check the box if applicable:
 I inter o 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. _____ Party candidate.

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

11. Name of Treasurer or Deputy Treasurer:
Marshall Christy

12. Telephone:
(386) 278-0403

13. Email Address:
treasurer@lauriechristy.com

14. Mailing Address:
131 University Blvd

15. City:
Daytona Beach

16. State:
FL

17. Zip Code:
32118

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

19. Name of Bank:
Space Coast Credit Union

20. Address:
268 LPGA BLVD

21. City:
Daytona Beach

22. County:
Volusia

23. State:
FL

24. Zip Code:
32124

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: 4-16-2024

26. Signature of Candidate:

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)
I, Marshall Christy do hereby accept the appointment designated above as:
(Please Print or Type Name)

Campaign Treasurer. Deputy Treasurer.

28. Date: 4-16-2024

29. Signature of Campaign Treasurer or Deputy Treasurer: