

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

RECEIVED

MAY 10 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 K 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 #):

Daytona Beach
City Commissioner Zone 2

8. If a candidate for a nonpartisan office, check the box if applicable:

☐ I intend to 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) 278-0399

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:

Wells Fargo

20. Address:

441 Seabreeze Blvd.

21. City:

Daytona Beach

22. County:

Volusia

23. State:

FL

24. Zip Code:

32118

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:

05/10/24

26. Signature of Candidate:

X Laurie K Christy

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:

05/10/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X Marshall Christy