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 filing officer before opening the campaign account.

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OFFICE USE ONLY

opening the campaign account.	
1. CHECK APPROPRIATE BOX(ES):	
	rer/Deputy
2. Name of Candidate (in this order: First, Middle, Last):	3. Address (include PO Box or Street, City, State, Zip Code):
(Please Print or Type Name)	2507 FUIRFAX AVE
Mrc. Balter	h Darch TI and
01000	New Smy RNA Beach, FL 32168
4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address:	
(7/6) 47/-2924 124 724//3 (not required for qualifying purpos	ses) Vic Bater Volusia @ gma, Locom
7. Office Sought (include district, circuit, group, or seat #):	8. If a candidate for a <u>nonpartisan</u> office, check the box
Republican State Committeema	if applicable: I intend to run as a Write-In Candidate.
9. If a candidate for partisan office, check the box and fill in	
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐	Republicum Party candidate.
10. I have appointed the following person to act as my:	☐ Campaign Treasurer ☐ Deputy Treasurer
11. Name of Treasurer or Deputy Treasurer:	12. Telephone: 13. Email Address:
Vic Boker	13. Email Address: (716) 471-2929 Vic Buker LoLusia a grail. con ty: 16. State: 17. Zip Code: 3216
14. Mailing Address: 15. Cit	ty: 16. State: 17. Zip Code:
2507 Foinfax Ave New	Singrapa Bank FC 32160
18. I have designated the following bank as my (check appr	ropriate box):
19. Name of Bank:	20. Address: 705 F Thind Ave bunty: 23. State: 24. Zip Code: 32/69
21. City: 22. Co	ounty: 23. State: 24. Zip Code:
TRUIST 21. City: 22. Co New SmyrNa Beach 1/0.	Lusia FL 32169
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.	
	26. Signature of Candidate:
25. Date: 4/25 / 2029	X //clya//
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)	
the Baller	
(Please Print or Type Name)	do hereby accept the appointment designated above as:
☐ Campaign Treasurer.	Deputy Treasurer.
/ / -/	29. Signature of Campaign Treasurer of Deputy Treasurer
28. Date: 4/25/2024	X /achipa/s
DS-DE 9 (Eff. 10/23)	Rule 1S-2.001, F.A.C.