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

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

(PLEASE PRINT OR TYPE)

MAY 20 2024

BY: SG

NOTE: This form must be on file with the filing officer befor 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	
Name of Candidate (in this order: First, Middle, Last):     (Please Print or Type Name)	3. Address (include PO Box or Street, City, State, Zip Code):
JAIR KESSLER	81 BUSCHMAN DRIVE PONCE INLET F/ 32127
4. Telephone:  (917) 5398706  5. Candidate's Voter Registration #: 6. Email Address:  129864219  (not required for qualifying purposes)  face. Kesslen C nyu Edu  (not required for qualifying purposes)	
7. Office Sought (include district, circuit, group, or seat #):  SEAT # 4, COUNCIL MEMBER, TOWN of if applicable:  PONCE INLET  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: 12. Telephone: 13. Email Address:	
Sarah Lones 13861290-2653 Sarahjanejonese	
14. Mailing Address:	ity: 16. State: 17. Zip Code:
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository  19. Name of Bank:  20. Address:	
TRUIST	20. Address: 3640 S. Atlantic AUE.  County: 23. State: 24. Zip Code: 7000 AUE.
21. City: 22. C	County: 23. State: 24. Zip Code:
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: 5/20/24	26. Signature of Candidate:
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)	
I, SARAH JONESdo hereby accept the appointment designated above as:	
Campaign Treasurer.	
	29. Signature of Campaign Treasurer of Deputy Treasurer
28. Date: May 18, 2024	X Soroh Lover
DS-DE 9 (Eff. 10/23)	Rule 1S-2.001, F.A.C.