## RECEIVED

## 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

MAY 20 2024

BY: SG

OFFICE USE ONLY opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): ☐ Depository ☐ Office ☐ Partv ☐ Treasurer/Deputy ☑ Initial Filing of Form ☐ Re-filing to Change: 3. Address (include PO Box or Street, City, State, Zip Code): 2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name) 81 BUSCHMAN DRIVE JAIR KESSLER PONCE INLET FI 32127 5. Candidate's Voter Registration #: 6. Email Address: 4. Telephone: (917) 539-8706 129864219 Jan. Kessler C nyv. Edu 7. Office Sought (include district, circuit, group, or seat #):
SEAT # 4, Councilmember, Town of
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. Deputy Treasurer 10. I have appointed the following person to act as my: 

Campaign Treasurer 12. Telephone: 13. Email Address: 11. Name of Treasurer or Deputy Treasurer: 15. City: 16. State: 17. Zip Code: JAIR KESSIER 15. City: PONCE INLET 14. Mailing Address: 32127 81 Buschman Drue 18. I have designated the following bank as my (check appropriate box):  $\square$  Primary Depository  $\square$  Secondary Depository 20. Address: 3640 S. Atlantic AVE.
22. County: 23 States 19. Name of Bank: TRUIST 24. Zip Code: 21. City: Daytona Beach Shores FLORIDA VOLUSIA 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: 5/20/24 Kessler 25. Date: X am Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box) 27. (Please Print or Type Name) do hereby accept the appointment designated above as: Deputy Treasurer. Campaign Treasurer. 29. Signature of Campaign Treasurer of Deputy Treasurer 5/20/24 28. Date: ain X Rule 1S-2.001, F.A.C. DS-DE 9 (Eff. 10/23)