

APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES

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

AUG 1 '17 PM 2:39

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying  
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)  
Belle Brotemarkle Schumann

3. Address (include post office box or street, city, state, zip  
code) P.O. BOX 291581  
Port Orange, FL 32129

4. Telephone

(386) 767 5285

5. E-mail address

re-electjudgebelkeschumann@aol.com

6. Office sought (include district, circuit, group number)

Judge of the County Court  
Volusia County, Group 2

7. If a candidate for a nonpartisan office, check if  
applicable: n/a

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable:

Write-In     No Party Affiliation     \_\_\_\_\_ Party

My intent is to run as a

n/a

candidate.

9. I have appointed the following person to act as my

Campaign Treasurer     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

EVA F. BOWLING

11. Mailing Address

42 S. PENINSULA DRIVE

12. Telephone

(386) 253-0677

13. City

DAYTONA BEACH

14. County

VOLUSIA

15. State

FL

16. Zip Code

32118

17. E-mail address

ebowling@bkacpa.com

18. I have designated the following bank as my

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 APPOINTMENT OF CAMPAIGN TREASURER AND  
DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

8-1-17

26. Signature of Candidate

X Belle Schumann

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, EVA F. BOWLING, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

7-28-17

Date

X

Eva F Bowling

Signature of Campaign Treasurer or Deputy Treasurer

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7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate. *n/a*

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In     No Party Affiliation     \_\_\_\_\_ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Belle B. Schumann

11. Mailing Address

PO Box 291581

12. Telephone

(386) 767-5285

13. City

Port Orange

14. County

Volusia

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25. Date

8/1/17

26. Signature of Candidate

Belle Schumann

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Belle Schumann, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer  Deputy Treasurer.

8/1/17

Date

Belle Schumann

Signature of Campaign Treasurer or Deputy Treasurer