

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

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

(PLEASE PRINT OR TYPE)

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**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)      3. Address (include post office box or street, city, state, zip code)

*Barbara E Girtman*      *1426 Villa Ct*

4. Telephone      5. E-mail address

*(386) 308-9058*      *barb@barbagirtman.com*  
*barbagirtman@yahoo.com*

6. Office sought (include district, circuit, group number)      7. If a candidate for a nonpartisan office, check if applicable:

*County Council District 1*       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: 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  
*Barbara E Girtman*

11. Mailing Address      12. Telephone

*1426 Villa Court*      *(386) 308-9058*

13. City      14. County      15. State      16. Zip Code      17. E-mail address

*Deland*      *Volusia*      *FL*      *32724*      *barbagirtman@yahoo.com*

18. I have designated the following bank as my  Primary Depository  Secondary Depository

19. Name of Bank      20. Address

*Mainstreet Bank*      *1500 N Spring Garden Ave*

21. City      22. County      23. State      24. Zip Code

*Deland*      *Volusia*      *FL*      *32724*

**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      26. Signature of Candidate

*8/1/17*      **X** *Barbara E Girtman*

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
I, *Barbara Girtman*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer  Deputy Treasurer.  
*8/1/17*      **X** *Barbara E Girtman*  
Date      Signature of Campaign Treasurer or Deputy Treasurer