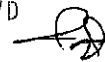


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

05-11-18P01:05 RCVD



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)**

*Loren Humphrey King*

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

*2770 Sadler Lane  
Deltona, FL 32738*

**4. Telephone**

*(386) 532-7915*

**5. E-mail address**

*quiet\_knight@yahoo.com*

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

*City Commissioner District 1*

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

☐ 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    ☒ *Republican* Party candidate.

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

**10. Name of Treasurer or Deputy Treasurer**

*Cathy Blaile*

**11. Mailing Address**

*3139 Mapleshade St*

**12. Telephone**

*(386) 801-8091*

**13. City**

*Deltona*

**14. County**

*Volusia*

**15. State**

*FL*

**16. Zip Code**

*32738*

**17. E-mail address**

*tcblaile@gmail.com*

**18. I have designated the following bank as my**

☐ Primary Depository

☐ Secondary Depository

**19. Name of Bank**

*Bank of America*

**20. Address**

*2745 Elkcam Blvd.*

**21. City**

*Deltona*

**22. County**

*Volusia*

**23. State**

*FL*

**24. Zip Code**

*32738*

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**

*5-7-2018*

**26. Signature of Candidate**

*X Loren H. King*

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

I, *Cathy Blaile*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer

☐ Deputy Treasurer

*5/9/18*

Date

*X*

*Cathy Blaile*

Signature of Campaign Treasurer or Deputy Treasurer