

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

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

(PLEASE PRINT OR TYPE)

JUN 25 '19 AM 8:48

**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)**

William E. Roberts

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

[REDACTED]

**4. Telephone**

[REDACTED]

**5. E-mail address**

vote4willroberts@gmail.com

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

Tax Collector

**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**

William Roberts

**11. Mailing Address**

[REDACTED]

**12. Telephone**

[REDACTED]

**13. City** [REDACTED]    **14. County** [REDACTED]    **15. State** [REDACTED]    **16. Zip Code** [REDACTED]    **17. E-mail address**  
vote4willroberts@gmail.com

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

**19. Name of Bank**

Space Coast Credit Union

**20. Address**

1701 S. Dixie Freeway

**21. City**

New Smyrna Beach

**22. County**

Volusia

**23. State**

FL

**24. Zip Code**

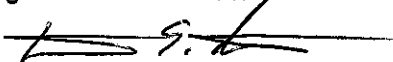
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**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

06/25/2019

**26. Signature of Candidate**



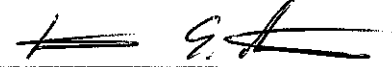
**27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)**

I, William Roberts, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer  Deputy Treasurer.

06/25/2019

Date



Signature of Campaign Treasurer or Deputy Treasurer