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 qualifying officer before opening the campaign account.

RECEIVED

JUL 1 2 2019

Volusia County
Department of Elections

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)
BILLIE A WHEELER	3 OCEANS WEST BLVD 6C7 DAYTONA Beach Sh., Fl 32118

4. Telephone	5. E-mail address	
(386) 846-4525	billiewhe@gmail.com	

6. Office sought (include district, circuit, group number)	7. If a candidate for a **nonpartisan** office, check if applicable:
Vol. County CouncilMember District 2	☐ 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

John Schmitz CPA

11. Mailing Address	12. Telephone
3703 S. Atlantic Ave Unit 801	(386) 304-4587

13. City	14. County	15. State	16. Zip Code	17. E-mail address
Daytona Beach	Volusia	FL	32118	

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

19. Name of Bank	20. Address
Bank of America	3046 S. Atlantic Ave

21. City	22. County	23. State	24. Zip Code
Daytona Bch Shores	Volusia	Fl	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	26. Signature of Candidate
7-12-19	X Billie Wheeler

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

I, ~~Billie A. Wheeler~~ John Schmitz ____, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☑ Campaign Treasurer ☐ Deputy Treasurer.

7-12-19	X John Schmitz
Date	Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 10/10)   Rule 1S-2.0001, F.A.C.