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.



OFFICE USE ONLY

| 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) 609 Hidden Pines Blvd New Smyrna Beach FL | | | | | | |
| Russell (Russ) Owen | | | | | | | | | | | | |
| 4. Telephone | 5. E-mail address | | | | 32168 | | | | | | | |
| (386) 314-3433 | russelle | ussellowen7@gmail.com | | | | | | | | | | |
| 6. Office sought (include district, circuit, group number) Mayor - New Smyrna Beach | | | | | | 7. If a candidate for a <u>nonpartisan</u> 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 Party candidate. | | | | | | | | | | | | |
| 9. I have appointed the following person to act as my | | | | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer Russ Owen | | | | | | | | | | | | |
| 11. Mailing Address | | | | | | 12. Telephone | | | | | | |
| 609 Hidden Pines Blvd (386) 314-3433 | | | | | | | | | | | | |
| 13. City | y 14. County | | | ate | · | | | | | | | |
| New Smyrna Beach Volusia FL | | | | | 32168 russellowen7@gmail.com | | | | | | | |
| 18. I have designated the following bank as my | | | | | | | | | | | | |
| 19. Name of Bank | | | | | 20. Address | | | | | | | |
| TD Bank | | | | | 1811 SR 44 | | | | | | | |
| 21. City 2 | | 22. County | | 23. State | | | | 24. Zip Code | | | | |
| New Smyrna Beach | ew Smyrna Beach Volusia | | | | FL | | | | 32168 | | | |
| 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 | | | | | | | | | | | | |
| 06/04/2020 | | | | | X | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | | | |
| Russ Owen , do hereby accept the appointment | | | | | | | | | | t | | |
| (Please Print or Type Name) | | | | | | | | | | | | |
| designated above as: Campaign Treasurer Deputy Treasurer. | | | | | | | | | | | | |
| 06/04/2020 X | | | | | Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | |
| Date |) | | | Sigr | nature | of Campaig | gn Treasure | r or Depu | ity Treasure | er | | |