## 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.									OFFIC	E USE	ONLY	
1. CHECK APPROPRIATE BOX(ES):												
	surer/	Deputy [	<b>Deposit</b>	tory _	Office		Party					
2. Name of Candidate (in this order: First, Middle, Last)					Address (include post office box or street, city, state, zip							
Elisabeth ["Lisa"] Custis Martin					code)							
4. Telephone	5. E-mail address				618 S Pine St New Smyrna Beach, FL 32169-2947							
(408 ) 205-6842	lisamartinformayor@gmail.c											
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if							
Mayor of New Smyrna Beach, FL					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 Campaign Treasurer Deputy Treasurer												
10. Name of Treasurer or Deputy Treasurer												
Lisa Martin												
11. Mailing Address						12. Telephone						
618 S Pine St						( 386 ) 402-4042						
13. City	14. County		15. State		16.	6. Zip Code 17. E-mail address						
New Smyrna Beach	n Volusia		FL		32	32169 lisamartinformayor@gmail.com						
18. I have designated the	Primary Depository Secondary Depository											
19. Name of Bank	. Address											
CenterState Bank 76						63 E 3rd Ave						
21. City		22. County				23. State			24. Zip Co	ode		
New Smyrna Beach		Volusia				FL			32169			
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					6. Signature of Candidate							
6/4/2020 X					( ECHestus							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
i,Lisa Martin					, do hereby accept the appointment							
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
6/4/2020 X 2C 1/25 tui												
Date						Signature of Campaign Treasurer or Deputy Treasurer						