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

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

(PLEASE PRINT OR TYPE)

SEP 3'20 PM 4:18

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	
1. CHECK APPROPRIATE BOX(ES):	OFFICE USE ONLY
1-32-1 mm	easurer/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
BARDARA B. DEERING	
4. Telephone 5. E-mail address	DELAND, FL 32720
(954)801-9557 DEERING P@ AOL. COM	DELAND, FL 32 120
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Volusin County Soil and WATER CONSEL	applicable:
District - SEAT 4	My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> office, check block and fill i	n 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	
11. Mailing Address	
6611 MANSOUR LANE	12. Telephone
	(386) 478-6533
PORT ORANGE VOLUSIA FL	16. Zip Code 17. E-mail address 32 128 CTMT 0214 @ YAhoo, Com
18. I have designated the following bank as my	Primary Depository Secondary Depository
	20. Address
Suntrust	2595 S. Woodland Blvd.
21. City  DE LAND  22. County  VOLUSIA	23. State 24. Zip Code
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE F	32/49
DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.	
25. Date 2	6. Signature of Candidate
9/3/20	( Backmara il Deco.)
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
, Cheryl TAAFFE , do hereby accept the appointment	
(Please Print or Type Name)	
designated above as: Campaign Treasurer Deputy Treasurer.	
1/1/2020 X/ Glly ( ) Day flle	
/ Date ( Signature )	gnature of Campaign Treasurer or Deputy Treasurer