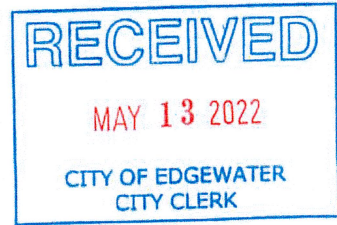


**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(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

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)

Charles Franklin Martin

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

205 Cherrywood Lane
Edgewater Florida 32132

4. Telephone

(386) 847-4144

5. E-mail address

CFMartin64@gmail.com

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

City Council Dist. 1

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 _____ Party candidate.

I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Michele Lenae Martin

11. Mailing Address

205 Cherrywood Lane Edgewater Florida

12. Telephone

(386) 847-4144

13. City

Edgewater

14. County

Volusia

15. State

FL.

16. Zip Code

32132

17. E-mail address

CFMartin64@gmail.com

18. I have designated the following bank as my

Primary Depository

Secondary Depository

19. Name of Bank

Bank of America

20. Address

1880 SR 94

21. City

New Smyrna Beach

22. County

Volusia

23. State

FL.

24. Zip Code

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

4-25-22

26. Signature of Candidate

X Charles F. Martin

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

I, MICHELE MARTIN, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4-25-22

Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer