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)

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

4. Telephone

(   )

5. E-mail address

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

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.

9. **I have appointed the following person to act as my**   ☐ Campaign Treasurer   ☐ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

11. Mailing Address

12. Telephone

(   )

13. City

14. County

15. State

16. Zip Code

17. E-mail address

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

19. Name of Bank

20. Address

21. City

22. County

23. State

24. Zip Code

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

X

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

I, _____ , do hereby accept the appointment

(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer.   ☐ Deputy Treasurer.

X

_____   _____
Date   Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.