- Com	STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	OFFICE USE ONLY	
	(PLEASE TYPE)		
	CHECK APPROPRIATE BOX:		
	Deput	ty Treasurer Reappointment of Treasurer	
	-	Address (include post office box or street, city, state, zip code)	
	JON T. M'FATTER	1510 MALKENZIE COUNT LYNN HAVEN FL 32444	
	Telephone (optional) 2. Party (Partisan candidates only)		
	(852) 5329993 M/A-	SLITTON BOTTON DISTRICT 4	
	I have appointed the following person to act as my		
	4. Name of Treasurer or Deputy Treasurer Williams		
	5. Mailing Address (If post office box or drawer add street address	6. Telephone	
	7. City 8. County 1.		
	Panana City Bay	9. State FL 10. Zip Code 32404	
		ary Depository Secondary Depository	
	11. Name of Bank Peoples Finss	12. Street Address 1038 / HAMISON Are	
	Peoples FINST 13. City PANAMA LINY BAY	15. State 16. Zip Code FC 3 2 4 0 /	
	17. Signature of Candidate	Date 1/25/08	
	Campaign Treasurer's Acceptance of Appointment		
	I, <u>Stacey Williams</u> (Please Print or Type)	, do hereby accept the appointment as	
	Campaign Treasurer Deputy Treasurer for the	campaign of Jon MCFatter,	
	who is seeking nomination or election as a $M D \overline{M}$	artist candidate to the office of	
	School Board Dist 4		
	UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.		
	125/05 ×	Stacey Williams	
	Date	Signature of Campaign Treasurer or Deputy Treasurer	

DS-DE 9 (Rev. 01/08)