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:		
Original Appointment Deputy Treasurer	Reappointment of Treasurer Secondary Depository	
	. Address (include post office box or street, city, state, zp code)	
Dan Estes	POBOX 684 Lunn Haven, 7h 32444	
Telephone (optional) 2. Party (Partisan candidates only) 3. Office (add district, circuit, group number) District  (a) (b) (can by comm (SSID) Craft		
	paign Treasurer Deputy Treasurer	
4. Name of Treasurer or Deputy Treasurer		
5. Mailing Address (If post office box or drawer add street address)	82624783	
7. City WINN Haven 8. County County Bay	9. State	
I have designated the following named bank as my	ry Depository Secondary Depository	
11. Name of Bank Peglons 12. Street Address 2320 S. Hewy 77		
13. City 14. County Bay	15. State 16. Zip Code 22444	
17. Signature of Candidate	Date	
Campaign Treasurer's Acceptance of Appointment		
Fort as		
I,(Please Print or Type)	, do hereby accept the appointment as	
Campaign Treasurer Deputy Treasurer for the ca	Campaign Treasurer Deputy Treasurer for the campaign of Dan tStee S	
who is seeking nomination or election as a		
County Commission District # (Party)  As a duly registered voter in Boy		
County, Florida, I am qualified to accept this appointment.	$\mathcal{O}$	
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.		
Sep 11, 2007 x D N 3		
( Date )	Signature of Campaign Treasurer or Deputy Treasurer	