| STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) | OFFICE USE ONLY |
|---|---|
| C (PLEASE TYPE) | |
| | |
| Original Appointment Dep | uty Treasurer Reappointment of Treasurer |
| C Name of Candidate | 1. Address (include post office box or street, city, state, zip code) |
| Mary Kelley | 1139 S. Comet Ave Callaway, FL 32404 |
| Telephone (optional) 2. Party (Partisan candidates only | |
| 1850,866-5097 | City Commissioner Ward 4 |
| | paign Treasurer Deputy Treasurer |
| 4. Name of Treasurer or Deputy Treasurer | |
| 5. Mailing Address (If post office box or drawer add street address | ss) 6. Telephone |
| 7 ALZ IN AL DEVICE CALLANDER 324AU 850-871-267A | |
| 7. City Callaway Bay | 9. state Florida, 32404 |
| I have designated the following named bank as my Primary Depository Secondary Depository | |
| 11. Name of Bank12. Street AddressSuntrust Bank5705 Cherry St.13. City14. County15. State16. Zip Code | |
| 13. City d 14. County D | 15. State 16. Zip Code |
| Callaway Bay | 5705 Cherry St. 15. State FL 16. Zip Code 32404 Date |
| 17. Signature of Candidate | Date |
| X mary Kelley | 02-06-08 |
| Campaign Treasurer's Acceptance of Appointment | |
| I. LAURA RObinson (Please Print or Type) | , do hereby accept the appointment as |
| Campaign Treasurer Deputy Treasurer for the campaign ofMAry_Kelley | |
| who is seeking nomination or election as a candidate to the office of | |
| City Commissioner Ward & Callaway | |
| 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. | |
| Feb - 6 - 08 X | Signature of Campaign Treasurer or Deputy Treasurer |
| DS-DE 9 (Rev. 01/08) | |