## 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 filing officer before



City Clerk's Office City of Neptune Beach

opening the campaign account.				(	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):					
☐ Initial Filing of Form ☐ Re-filing to Change: ☐ Trea	asurer/Depu	er/Deputy			
2. Name of Candidate (in this order: First, Middle, Last):	3. Add	3. Address (include PO Box or Street, City, State, Zip Code):			
(Please Print or Type Name)	22	227A MARGARET ST NEPTUME BEACH, FL 32266			
FFA I CIIN	NE	NEPTUME BEACH, FL 32266			
		To = 11.1			
(904) 241-5493 (not required for qualifying pu					
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:					
NEPTUNE BEACH CITY COUNCIL SEAT 3 Intend to run as a Write-In Candidate.					
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a					
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐ Party candidate.					
10. I have appointed the following person to act as my:   Campaign Treasurer  Deputy Treasurer					
11. Name of Treasurer or Deputy Treasurer:	12. Telephone: 13. Email Address:				
KERRYCHN					
	15. City: NEPTUNE BEACH			ite:	17. Zip Code:
					32266
18. I have designated the following bank as my (check appropriate box): Primary Depository					
19. Name of Bank:  YSTAR CREDIT UNION	20. Address: 1367 ATLAMIC BLVD				
21. City: 22. Co				ite:	24. Zip Code:
194		WAL FL			32266
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.					
25. Date: 4/8/24	26. S	26. Signature of Candidate:			
23. Date.	X	X Kerry .			
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)					
KERRY CHIN					
do hereby accept the appointment designated above as:  (Please Print or Type Name)					ated above as:
☐ Campaign Treasurer.	Deputy Treasurer.				
28. Date: A 10/24		29. Signature of Campaign Treasurer of Deputy Treasurer			
28. Date: 4/8/24	X	X Lew C-			
DS-DE 9 (Eff. 10/23)				R	Rule 1S-2.001, F.A.C.