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

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CITY OF NAPLES CITY CLERK

| officer before opening the campaign account. | | | | | OFFICE USE ONLY | | | | | | | | |
|--|------------------------|-------------------|------------------|---|---|-----------------------------------|---------------------|-----|-----------|-----|-------|--|--|
| 1. CHECK APPROPRIATE BOX(ES): | | | | | | | | | | | | | |
| ✓ Initial Filing of Form | Re-f | filing to Change: | | reasu | urer/De | eputy [|] Depository | | Office | | Party | | |
| Name of Candidate (in this order: First, Middle, Last) Paul E Perry | | | | | 3. Address (include post office box or street, city, state, zip code) 1730 3rd St S | | | | | | | | |
| 4. Telephone | 5. E-mail | \ | Naples, FL 34102 | | | | | | | | | | |
| (614 ₎ 203-7800 | paul.perry5@icloud.com | | | | | | | | | | | | |
| 6. Office sought (include district, circuit, group number) | | | | | 7. If a candidate for a <u>nonpartisan</u> office, check if | | | | | | | | |
| Naples City Council | | | | | 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 AffiliationParty candi | | | | | | | | | didate. | | | | |
| 9. I have appointed the following person to act as my | | | | | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer Paul E Perry | | | | | | | | | | | | | |
| 11. Mailing Address 1730 3rd St S | | | | | | 12. Telephone (614) 203-7800 | | | | | | | |
| 13. City 14. County 15. S | | | 15. Sta | ate 16. Zip Code 17. E-mail address | | | | | | | | | |
| Naples | Collier | | FL | | 34102 paul.perry5@i | | | | | | | | |
| 18. I have designated the following bank as my | | | | | | | | ory | | | | | |
| T | | | | | | 20. Address 418 9TH 5T 5 | | | | | | | |
| 21. City | | 22. County | | | | 23. State | | | 24. Zip C | ode | | | |
| NAPLES | | COLLI | ER | | | FZ | r | | 3410 | 22 | | | |
| 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 | | | | | | | | | |
| September 3, 2019 | | | | | X | | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | | | | |
| I, Paul E Perry | | | | | , do hereby accept the appointment | | | | | | | | |
| (Please Print or Type Name) | | | | | | | | | | | | | |
| designated above as: | \boxtimes | Campaign T | reasure | r | | Deputy Tre | asurer. | | | | | | |
| September 3, 2019 | | | | | | | | | | | | | |
| Date | | | | Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | | | |