

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

RECEIVED

NOV 02 2023

CITY OF NAPLES  
CITY CLERK

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form      Re-filing to Change:       Treasurer/Deputy       Depository       Office       Party

2. Name of Candidate (in this order: First, Middle, Last)

William E. Kramer

3. Address (include post office box or street, city, state, zip code)

990 Diana Avenue  
Naples, FL 34103

4. Telephone

(239) 272-2571

5. Candidate's Voter Registration #:

103020489

(Not required for Qualifying Purposes)

(Not required for Qualifying Purposes) - **Phonetic spelling for audio ballot:** Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form):

6. Office sought (include district, circuit, group number)

Naples City Council

7. If a candidate for a nonpartisan office, check if 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 Affiliation       \_\_\_\_\_ Party candidate.

9. I have appointed the following person to act as my       Campaign Treasurer       Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Susan L. Kramer

11. Telephone

(239) 777-9961

12. Mailing Address

990 Diana Avenue

13. City

Naples

14. State

FL

15. Zip Code

34103

16. I have designated the following bank as my       Primary Depository       Secondary Depository

17. Name of Bank

United Community Bank

18. Address

3200 Tamiami Trail North

19. City

Naples

20. County

Collier

21. State

FL

22. Zip Code

34103

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.

23. Date

10-26-2023

24. Signature of Candidate

X William E. Kramer

25. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Susan L. Kramer, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:       Campaign Treasurer.       Deputy Treasurer.

10-26-2023

Date

X Susan L. Kramer

Signature of Campaign Treasurer or Deputy Treasurer