## 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 opening the campaign account.

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OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):					
■ Initial Filing of Form □ Re-filing to Change: □	Treasur	er/Deputy 🗆 De	pository	☐ Offic	e 🔲 Party
2. Name of Candidate (in this order: First, Middle, Las (Please Print or Type Name) James E. Boldt, Jr.	st):	3. Address (include 618 Laguna Drive Venice, FI. 34285	9	or Street, Ci	ty, State, Zip Code):
4. Telephone:  (941 ) 429-5210  (not required for qualifying purposes)  5. Candidate's Voter Registration #:  (include the purpose of the pur					
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a nonpartisan office, check the box					
City Council Seat 4   if applicable:					
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 Candid	date.	Republican			_ Party candidate.
10. I have appointed the following person to act as my:   Campaign Treasurer   Deputy Treasurer					
11. Name of Treasurer or Deputy Treasurer:		•		13. Email Address:	
Sarah Lee (941 ) <sup>315-1970</sup> sarahvenice618@gmail.c					
14. Mailing Address:	15. Cit	•	16. St	ate:	17. Zip Code:
5657 America Drive	Saras	ota	FI		34231
18. I have designated the following bank as my (check appropriate box):   Primary Depository   Secondary Depository					
19. Name of Bank: Wells Fargo		20. Address: 446 TamiamiTrail S			
21. City:	22. Co	unty:	23. State:		24. Zip Code:
Venice	Saras	ota	FI		34285
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.					
February 1, 2024  25. Date:  26. Signature of Candidate:  X				4	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)					
I, Sarah Lee (Please Print or Type Name)	_do hereby accept the appointment designated above as:				
Campaign Treasurer	☐ Deputy Treasurer.				
march <b>Schwary</b> 1, 2024 <b>28.</b> Date:	29. Signature of Campaign Treasurer of Deputy Treasurer				
DS-DE 9 (Eff. 10/23)		1		/	Rule 1S-2.001, F.A.C.