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

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

(PLEASE PRINT OR TYPE)

100262101254

officer before opening the campaign account.							OFFICE	USE	ONLY	
1. CHECK APPROPRIATE BOX(ES):										
Initial Filing of Form	Re-filing to Change:	☐ Tr	reasurer/	Deputy [	Depository		Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip code)							
Sandy-Silbey SIBLEY			1224 Pine Needle Rd							
4. Telephone	5. E-mail address		Venice FL 34285							
(941 ) 525-4377	sandy@sibster.com									
6. Office sought (include district, circuit, group number)			7. If a candidate for a <u>nonpartisan</u> office, check if							
Venice City Council #3			applicable:  My intent is to run as a Write-In candidate.							
									idate.	
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 candidate.										
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer										
10. Name of Treasurer or Deputy Treasurer										
Norman R. Wirtz										
11. Mailing Address				12. Telephone						
512 Bayview Parkway  13. City  14. County  15. Sta				( 617 ) 901-4268						
13. City Nokomis	14. County Sarasota		te 16. Zip Code 17. E-mail address 34275 nrwirtz@gmail.com							
18. I have designated the following bank as my Primary Depository Secondary Depository										
19. Name of Bank	20. Address 446 5 TAMIAMI TR									
WELLS FAR 21. City VENICE	22. County			23. State			24. Zip Co	ode		
VENICE	SARAS	SOTI	A	F	L		342	85	_	
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							
6-18-2021				X Sunda SSills						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the apprepriate block)										
I, NORMAN R WIRTZ (Please Print or Type Name)				, do hereby accept the appointment						
designated above as: Campaign Treasurer Deputy Treasurer.										
18 JUNE 2021X ARWINE										
Date	Signatur	Signature of Campaign Treasurer or Deputy Treasurer								