SUPERVISER OF THE HONS 6495 CARCEINE FILL STELF	
STATE OF FLORIDA MILTON, U 32575 4552 OFFICE USE ONLY APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITOR CANDIDATES (Section 106.021(1), F.S.)	
(PLEASE TYPE)	
CHECK APPROPRIATE BOX:	
Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Deposit	tory
Name of Candidate 1. Address (include post office box or street, city, state, zip code)	5
Ruth Dupont Esser Gul F BReeze Fl. 32563 Telephone (optional) 2. Party (Partisan candidates only) 3. Office (add district, circuit, group number)	
1850)934-8545 Kepublican Commissioner Dist	4
I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
4. Name of Treasurer or Deputy Treasurer	
5. Mailing Address (If post office box or drawer add street address) 6. Telephone 6. Telephone 6. Telephone	
<u>4371 Marilyn Ct.</u> 7. City Gulf Breeze Stata Rosa Fl. 32563	
I have designated the following named bank as my Primary Depository Secondary Depository	1
11. Name of Bank 12. Street Address	-
Kegions Brok Hury 98 Gulf Benze Fl.	
13. City County 14. County 14. County 14. County 15. State 16. Zip Code Gulf Breeze Stata Rosa FI 32563	
Gulf Breeze SAnta Kosa FI 32563 17 Signature of Gandidate Date	-
X 1/2 home 2/19/10	
Campaign Treasurer's Acceptance of Appointment	
I, do hereby accept the appointment a	s
(Please Print or Type)	,
who is seeking nomination or election as a Republican candidate to the office of (Party)	
Commission Dist. 4. As a duly registered voter in SANTA Rosa	
County, Florida, I am qualified to accept this appointment.	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.	
2/19/16 X Signature of Campaign Treasurer or Deputy Treasurer	
DS-DE 9 (Rev. 02/06)	-

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