

STATE OF FLORIDA  
APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES  
(Section 106.021(1), F.S.)

(PLEASE TYPE)

OFFICE USE ONLY

2005 MAR 21 PM 12:10

CHECK APPROPRIATE BOX:

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depository

Name of Candidate

BILL FREDERICK

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

1411 EDGEWATER DR  
SUITE 100 ORLANDO FL 32804

Telephone (optional)

2. Party (Partisan candidates only)

3. Office (add district, circuit or group number)

MAYOR - CITY OF ORLANDO

I have appointed the following person to act as my

Campaign Treasurer

Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer

JOAN D. RUFFIER

5. Mailing Address (If post office box or drawer add street address)

777 ALBA DRIVE

6. Telephone

407 425-7336

7. City

ORLANDO

8. County

ORANGE

9. State

FLORIDA

10. Zip Code

32804

I have designated the following named bank as my

Primary Depository

Secondary Depository

11. Name of Bank

UNITED HERITAGE BANK

12. Street Address

3378 EDGEWATER DR

13. City

ORLANDO

14. County

ORANGE

15. State

FLORIDA

16. Zip Code

32804

17. Signature of Candidate

Bill Frederick

Date

March 18, 2005

Campaign Treasurer's Acceptance of Appointment

I, JOAN D. RUFFIER, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer     Deputy Treasurer    for the campaign of BILL FREDERICK

who is seeking nomination or election as a NON-PARTISAN candidate to the office of  
(Party)

MAYOR OF ORLANDO As a duly registered voter in ORANGE COUNTY

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.

3/18/05

Date

Joan D. Ruffier

Signature of Campaign Treasurer or Deputy Treasurer

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CHECK APPROPRIATE BOX:

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depository

Name of Candidate: BILL FREDERICK  
1. Address (include post office box or street, city, state, zip code):  
1411 EDGEWATER DR  
SUITE 100 ORLANDO FL 32804

Telephone (optional): \_\_\_\_\_ 2. Party (Partisan candidates only): \_\_\_\_\_ 3. Office (add district, circuit or group number):  
MAYOR - CITY OF ORLANDO

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

4. Name of Treasurer or Deputy Treasurer:  
SHANNON BROUILLETTE

5. Mailing Address (If post office box or drawer add street address): 811 N. MAGNOLIA AV 6. Telephone: 407 426 8288

7. City: ORLANDO 8. County: ORANGE 9. State: FLORIDA 10. Zip Code: 32803

I have designated the following named bank as my  Primary Depository  Secondary Depository

11. Name of Bank: UNITED HERITAGE BANK 12. Street Address: 3378 EDGEWATER DR

13. City: ORLANDO 14. County: ORANGE 15. State: FLORIDA 16. Zip Code: 32804

17. Signature of Candidate: X Bill Frederick Date: March 18, 2005

Campaign Treasurer's Acceptance of Appointment

I, SHANNON BROUILLETTE, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer  Deputy Treasurer for the campaign of BILL FREDERICK

who is seeking nomination or election as a NON - PARTISAN candidate to the office of  
(Party)

MAYOR OF ORLANDO As a duly registered voter in ORANGE

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.

3/18/05  
Date

X  
Signature of Campaign Treasurer or Deputy Treasurer