

RECEIVED

JUN / 1 2020

CITY OF PORT ORANGE  
CITY CLERK

**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 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)

Derek LaMontagne

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

993 Geiger Drive  
Port Orange, FL 32127

4. Telephone

(352 ) 562-1746

5. E-mail address

VolusiaDerek@Gmail.com

6. Office sought (include district, circuit, group number)  
Mayor of the City of Port Orange

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

Ken Sipes

11. Mailing Address

355 Applegate Lndg

12. Telephone

( 386 ) 673-7589

13. City

Ormond Beach

14. County

Volusia

15. State

FL

16. Zip Code

32174

17. E-mail address

ksipes77@gmail.com

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

19. Name of Bank

VyStar Credit Union

20. Address

750 Dunlawton Ave.

21. City

Port Orange

22. County

Volusia

23. State

Florida

24. Zip Code

32127

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

5/29/20

26. Signature of Candidate

X 

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

I, Ken Sipes, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

5/29/20  
Date

X   
Signature of Campaign Treasurer or Deputy Treasurer

RECEIVED

JUN / 1 2020

CITY OF PORT ORANGE  
CITY CLERK

**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 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)

Derek LaMontagne

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

993 Geiger Drive  
Port Orange, FL 32127

**4. Telephone**

(352 ) 562-1746

**5. E-mail address**

VolusiaDerek@gmail.com

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

Mayor of the City of Port Orange

**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**

Derek LaMontagne

**11. Mailing Address**

993 Geiger Drive

**12. Telephone**

( 352 ) 562-1746

**13. City**

Port Orange

**14. County**

Volusia

**15. State**

FL

**16. Zip Code**

32127

**17. E-mail address**

VolusiaDerek@gmail.com

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

**19. Name of Bank**

VyStar Credit Union

**20. Address**

750 Dunlawton Ave

**21. City**

Port Orange

**22. County**

Volusia

**23. State**

Florida

**24. Zip Code**

32127

**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**

5/29/20

**26. Signature of Candidate**

X *Derek LaMontagne*

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

I, Derek LaMontagne, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

5/29/20  
Date

X *Derek LaMontagne*  
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)  
(Please print or type)

OFFICE USE ONLY

**RECEIVED**

JUN / 1 2020

CITY OF PORT ORANGE  
CITY CLERK

I, Derek LaMontagne,

candidate for the office of Mayor of the City of Port Orange;

have been provided access to read and understand the requirements of  
Chapter 106, Florida Statutes.

X

Derek LaMontagne

Signature of Candidate

5/29/20

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).



# CITY OF PORT ORANGE

1000 CITY CENTER CIRCLE  
PORT ORANGE, FLORIDA 32129  
TELEPHONE 386-506-5563  
www.Port-Orange.org

## Acknowledgment for Electronic Filing of Campaign Finance Reports

Pursuant to Resolution No. 18-4, as described below, I, DEREK LAMONTAGNE, candidate for the office of Port Orange City Council have been advised of, and understand the written acknowledgement requirement regarding Electronic Filing. Furthermore, by initialing each subsection herewith mentioned below, I express my understanding of all resolution requirements as in accordance to Chapter 106, Florida Statutes.

X Derek LaMontagne 6/1/20  
Signature of Candidate Date

### RESOLUTION NO. 18-4

**A RESOLUTION OF THE CITY OF PORT ORANGE, VOLUSIA COUNTY, FLORIDA; REQUIRING ELECTRONIC FILING OF CAMPAIGN FINANCE REPORTS OF LOCAL CANDIDATES; AUTHORIZING THE CITY CLERK TO ENTER INTO AN AGREEMENT WITH THE VOLUSIA COUNTY SUPERVISOR OF ELECTIONS REGARDING THE ELECTRONIC FILING SYSTEM; ESTABLISHING ALTERNATIVE PROCEDURES FOR FILING CAMPAIGN FILING REPORTS; PROVIDING FOR REPEAL OF CONFLICTING RESOLUTIONS; PROVIDING FOR SEVERABILITY; AND PROVIDING AN EFFECTIVE DATE.**

**Acknowledgment:** The City Clerk must require each person given a secure sign-on to the electronic filing system to sign a written statement on a form prepared by the City Clerk acknowledging the following:

- DZ (Initials) (a) Campaign finance reports must be completed and filed through the County's electronic filing system not later than midnight of the day required by law therefore.
- DZ (b) Campaign finance reports not filed by midnight of the required day are deemed late-filed and are subject to the penalties prescribed under Section 106.07(8), Florida Statutes.
- DZ (c) Campaign finance reports filed through the County's electronic filing system are considered to be certified as to correctness within the meaning of Section 106.07(5), Florida Statutes, by the candidate and the candidate's treasurer, in the case of a candidate, or the political committee's chair and treasurer, in the case of a political committee, and such persons are subject to the provisions of Section 106.07(5), Florida Statutes.
- DZ (d) The person signing the statement is responsible for protecting the sign-on credentials from disclosure, and for all filings using such credentials, unless the person has notified the Supervisor that such credentials have been compromised.