

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

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

(PLEASE PRINT OR TYPE)

Received

NOV 20 2025

Council/Clerk

OFFICE USE ONLY

NOTE: This form must be on file with the filing officer before opening the campaign account.

**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):

(Please Print or Type Name)

Keith A Givens

**3. Address** (include PO Box or Street, City, State, Zip Code):

[REDACTED]  
[REDACTED]

**4. Telephone:**

[REDACTED]

**5. Candidate's Voter Registration #:**

(not required for qualifying purposes)

**6. Email Address:**

searchernet@comcast.net

**7. Office Sought** (include district, circuit, group, or seat #):

Maitland, FL City Council Seat 2

**8. If a candidate for a nonpartisan office, check the box if applicable:**

☐ I intend to run as a Write-In Candidate.

**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 Candidate. ☐ \_\_\_\_\_ Party candidate.

**10. I have appointed the following person to act as my:** ☒ Campaign Treasurer ☐ Deputy Treasurer

**11. Name of Treasurer or Deputy Treasurer:**

F. Thomas Rossetter

**12. Telephone:**

(407 ) 415-5825

**13. Email Address:**

tom.rossetter@gmail.com

**14. Mailing Address:**

1187 Charming Street

**15. City:**

Maitland

**16. State:**

FL

**17. Zip Code:**

32751

**18. I have designated the following bank as my** (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

**19. Name of Bank:**

Dearborne Federal Credit Union

**20. Address:**

201 N. New York Avenue, Suite 100

**21. City:**

Winter Park

**22. County:**

Orange

**23. State:**

FL

**24. Zip Code:**

32789

**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.**

**25. Date:**

11/19/25

**26. Signature of Candidate:**

X *Keith A Givens*

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

I, F Thomas Rossetter

do hereby accept the appointment designated above as:

(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

**28. Date:**

11/20/2025

**29. Signature of Campaign Treasurer or Deputy Treasurer**

X *F. Thomas Rossetter*