

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

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

(PLEASE PRINT OR TYPE)

BAY COUNTY
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BAY COUNTY
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NOTE: This form must be on file with the filing 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):
(Please Print or Type Name)

Bill Kinsaul

3. Address (include PO Box or Street, City, State, Zip Code):
P.O. Box 968
Lynn Haven, FL 32444

4. Telephone:

(850) 381-3631

(850) 381-3631

5. Candidate's Voter Registration #:

100611782
(not required for qualifying purposes)

6. Email Address:

wdkinsaul@gmail.com

7. Office Sought (include district, circuit, group, or seat #):
Clerk of Court, Bay County

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. Republican Party candidate.

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

11. Name of Treasurer or Deputy Treasurer:

Bill Kinsaul

12. Telephone:

(850) 381-3631

(850) 381-3631

13. Email Address:

wdkinsaul@gmail.com

14. Mailing Address:
P.O. Box 968, Lynn Haven, FL 32444

15. City:
Lynn Haven

16. State:
FL

17. Zip Code:
32444

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

19. Name of Bank:
Panhandle Credit Union

20. Address:
2718 MLK Jr. Blvd

21. City:
Panama City

22. County:
Bay

23. State:
FL

24. Zip Code:
32405

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: 01/03/2024

26. Signature of Candidate:

X 

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

I, BILL KINSAUL
(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

28. Date: 01/03/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X 