

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

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

(PLEASE PRINT OR TYPE)

2023 JUL 13 PM 1:56

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)

Robert W. Johnson "B.O.B."

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

*****Protected Address*****

4. Telephone

(850) 736 6609

5. E-mail address

SWATONE@ATT.NET

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

Sheriff

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 Republican Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Amy Tiffet

11. Mailing Address

*****Protected Address*****

12. Telephone

(850) 393 2256

13. City

14. County

15. State

16. Zip Code

17. E-mail address

SANTA ROSA

FL

AmyTiffet@gmail.com

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

19. Name of Bank

The First

20. Address

9290 NAVARRE PKWY

21. City

22. County

23. State

24. Zip Code

NAVARRE

SANTA ROSA

FL

32566

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

7-11-2023

26. Signature of Candidate

X 

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

I, Amy Tiffet, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

7-11-2023

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

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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)

ROBERT W. JOHNSON "BOB"

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

*****Protected Address*****

4. Telephone

(850) 7366609

5. E-mail address

SWATOW@ATT.NET

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

Sheriff

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 Republican Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

ROBERT JOHNSON

11. Mailing Address

*****Protected Address*****

12. Telephone

(850) 7366609

13. City

14. County

SANTA ROSA

15. State

FL

16. Zip Code

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9290 NAVASSE PKWY

21. City

NAVASSE

22. County

SANTA ROSA

23. State

FL

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32566

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25. Date

7-13-23

26. Signature of Candidate

X Robert Johnson

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

I, ROBERT JOHNSON, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

7-13-23

Date

X Robert Johnson
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

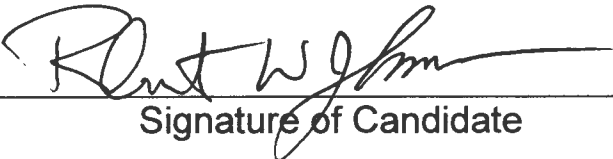
(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

2023 JUL 13 04:56

I, Robert Johnson,
candidate for the office of Sheriff;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X 
Signature of Candidate

7-11-23
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).



2023 JUL 13 PM1:59

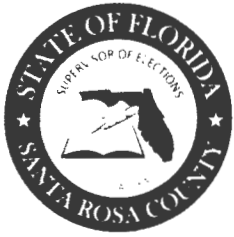
Tappie A. Villane

Santa Rosa County Supervisor of Elections

6495 Caroline Street Ste F
Milton FL 32570-4592
www.VoteSantaRosa.gov

Phone: (850) 983-1900
Fax: (850) 983-1829

2023 Candidate Information Sheet	
Name of Candidate Robert "Bob" Johnson	
Office Seeking Sheriff	If Partisan Office list Party Affiliation Republican
Address *****Protected Address***** 2	
E-Mail Address SWATONE@ATT.NET	Phone 850 736 6609
DOB or Voter ID # 2-9-63	Occupation Sheriff
Campaign Treasurer (Name and Address) Amy TIEFT *****Protected Address*****	
E-Mail Address AmyTIEFT@gmail.com	Phone 850 393-2256
Deputy Treasurer (Name and Address) Robert JOHNSON	
E-Mail Address SWATONE@ATT.NET	Phone 850 736-6609
What would you like the public to know about yourself? (Optional)	
What method of Qualifying <input checked="" type="checkbox"/> Petition or Pay Qualifying Fee?	



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Robert "Bob" Johnson Sheriff

Candidate Name and Office Seeking

Candidate Received Instructions and/or materials on the following:

SWATONE@ATT.NET
AmyTiffT@gmail.com
Please list email address to be used
for campaign report reminders.

- Received web address (below) for Candidate Handbook online. At the Division of Elections website under publications:
Publications/Reports - Division of Elections - Florida Department of State (myflorida.com)
- Provided access to Florida Statutes Chapter 106 – Campaign Financing and Chapter 104 which refers to Violations and Penalties.
Publications/Reports - Division of Elections - Florida Department of State (myflorida.com)
- Informed of Online Campaign Reports and due dates. (Frequency of Campaign Reports will change - will send updated Schedule) ID, Password and Pin Numbers will be sent through US Mail.
- Contributions: Limit is \$1,000 aggregate to include check, cash and in-kind per election cycle; \$50 Cash Limit (also includes candidate); Contributions from joint checking account is from the person who signed the check. Each contribution, no matter how small shall include address and if over \$100 must include specific occupation (cannot list business owner or sales, etc. – must list specific type of business. Interest from campaign account is considered a contribution from the bank. Also, contributions/loans from candidates must be listed. If over \$100, must list occupation. Cannot list occupation as "candidate").
- Expenditures: All transactions should go through campaign account. Must list address and purpose for each expenditure.
- Informed Candidate of the requirement that all printed materials should contain Political Disclaimers, samples are included in handbooks. The word "for" must be included for non-incumbents in body of advertisement.
- Sign Ordinances are on our website.

Robert Johnson 7-11-2023
Candidate (or Representative) Signature and Date

10/10/23
Due Date of First Campaign Report

Filing now
Due Date of Statement of Candidate
Form (if not turning in at pre-filing)