

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

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

(PLEASE PRINT OR TYPE)

2023 SEP 1 PM 2:04

**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) <i>Cindy M. Hall MLS(ASCP)</i>	3. Address (include post office box or street, city, state, zip code) <i>4740 La Casa Circle Pace FL 32571</i>
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4. Telephone <i>(850) 281-6701</i>	5. E-mail address <i>Cindyhall2@protonmail.com</i>
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6. Office sought (include district, circuit, group number) <i>Santa Rosa County Supervisor of Elections</i>	7. If a candidate for a <u>nonpartisan</u> office, check if applicable: <input type="checkbox"/> My intent is to run as a Write-In candidate.
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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  
*Cindy M Hall MLS(ASCP)*

11. Mailing Address <i>4746 La Casa Circle</i>	12. Telephone (   )
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13. City <i>Pace</i>	14. County <i>Santa Rosa</i>	15. State <i>FL</i>	16. Zip Code <i>32571</i>	17. E-mail address <i>Cindyhall2@protonmail.com</i>
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18. I have designated the following bank as my    Primary Depository    Secondary Depository

19. Name of Bank <i>Regions Bank</i>	20. Address <i>4725 Hwy 90</i>
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21. City <i>Pace</i>	22. County <i>Santa Rosa</i>	23. State <i>FL</i>	24. Zip Code <i>32571</i>
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**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.**

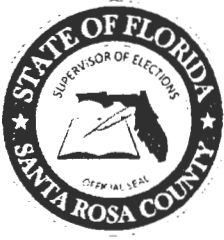
25. Date <i>9-1-23</i>	26. Signature of Candidate <b>X</b> <i>Cindy M Hall MLS(ASCP)</i>
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**27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)**

I, *Cindy M. Hall MLS(ASCP)*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:    Campaign Treasurer.    Deputy Treasurer.

*9-1-23* Date      **X** *Cindy M Hall MLS(ASCP)* Signature of Campaign Treasurer or Deputy Treasurer



# Tappie A. Villane

## Santa Rosa County Supervisor of Elections

2023 SEP 1 PM 2:11

6495 Caroline Street Ste F  
Milton FL 32570-4592  
[www.VoteSantaRosa.gov](http://www.VoteSantaRosa.gov)

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

### 2023 Candidate Information Sheet

<b>Name of Candidate</b> Cindy M. Hall MLS(CASCP)	
<b>Office Seeking</b> Santa Rosa County Supervisor of Elections	<b>If Partisan Office list Party Affiliation</b> Republican
<b>Address</b> 4746 La Casa Circle Pace FL 32571	
<b>E-Mail Address</b> Cindyhall2@protonmail.com	<b>Phone</b> 850-281-6701
<b>DOB or Voter ID #</b> 12-24-62	<b>Occupation</b> Clinical Lab Scientist
<b>Campaign Treasurer (Name and Address)</b> Cindy M. Hall 4746 La Casa Circle Pace FL 32571	
<b>E-Mail Address</b> Cindyhall2@protonmail.com	<b>Phone</b> 850-281-6701
<b>Deputy Treasurer (Name and Address)</b>	
<b>E-Mail Address</b>	<b>Phone</b>
<b>What would you like the public to know about yourself? (Optional)</b>  Petitions	
<b>What method of Qualifying - Petition or Pay Qualifying Fee?</b>	