

**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)**

Michael X. Rohan

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

239 S Cove Terr Dr

**4. Telephone**

(850 ) 814 3665

**5. E-mail address**

rogator@gmail.com

*Panama City, Fl. 32401*

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

Mayor Panama City

**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**

Michael X. Rohan

**11. Mailing Address**

239 S Cove Terr Dr

**12. Telephone**

( 850 ) 814 3665

**13. City**

Panama City

**14. County**

Bay

**15. State**

Fl

**16. Zip Code**

32401

**17. E-mail address**

rogator@gmail.com

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

**19. Name of Bank**

Centennial

**20. Address**

635 E Baldwin Rd.

**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 APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

1/29/2019

**26. Signature of Candidate**

*Michael X. Rohan*

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

I, Michael X. Rohan, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

1/29/2019

Date

*Michael X. Rohan*

Signature of Campaign Treasurer or Deputy Treasurer

11-91-01026210 305XV91