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				2 10 2 10 3 00		5. 11 3. 0 5. 0 5. 0 5. 0 5. 0 5. 0 5. 0 5. 0 5		
officer before opening the c					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)			<ul> <li>3. Address (include post office box or street, city, state, zip code)</li> <li>509 Pennsylvania Ave</li> </ul>					
Robert L. Schultz								
•	. E-mail address		Lynn Haven, Fla. 32444					
(850) 832-8749				7 16				
<ol> <li>Office sought (include district, circuit, group number)</li> <li>Lynn Haven City Commissioner, Seat 1</li> </ol>				<ol> <li>If a candidate for a <u>nonpartisan</u> office, check if applicable:</li> </ol>				
Lynn haven City Commissioner, Seat 1			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 AffiliationParty candidate.								
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer								
10. Name of Treasurer or Deputy Treasurer								
Robert L. Schultz         11. Mailing Address         12. Telephone								
11. Mailing Address 509 Pennsylvania Ave				(850) 832-8749				
13. City	14. County	15. Sta	te 16	Zip Code	17. E-mai	l address		
,	Bay	FI		144			@gmail.com	
18. I have designated the fo			] Prima	ry Deposito			ary Depository	
19. Name of Bank   20. Address								
				2330 S Hwy 77				
21. City	22. County			23. State			24. Zip Code	
Lynn Haven       Bay       FI       32444         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 26. Signature of Ca								
02/07/19 X 192 libute								
27. <b>Treasurer's Acceptance of Appointment</b> (fill in the blanks and check the appropriate block)								
I, <u>NOBEAT L. SCHULTZ</u> , do hereby accept the appointment (Please Print or Type Name)								
designated above as: Campaign Treasurer Deputy Treasurer.								
2/07/19 XAI Schultz								
Date Signature of Campaign Treasurer or Deputy Treasurer								

Rule 1S-2.0001, F.A.C.

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