 Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office P Name of Candidate (in this order: First, Middle, Last) Emmett F (Chip) Singleton Telephone E-mail address E-mail address Beulah ave Panama City FI 32404 Office sought (include district, circuit, group number) Office sought (include district, circuit, group number) Callaway Mayor 	
Emmett F (Chip) Singleton code) 4. Telephone 5. E-mail address (850) 819-0357 aaasinger@gmail.com 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check i applicable:	
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(850) 819-0357aaasinger@gmail.com6. Office sought (include district, circuit, group number)7. If a candidate for a nonpartisan office, check i applicable:Callaway Mayor7. If a candidate for a nonpartisan office, check i applicable:	
6. Office sought (include district, circuit, group number)7. If a candidate for a nonpartisan office, check i applicable:Callaway Mayorapplicable:	
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 DParty candidate.	
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer	
Emmett F (Chip) Singleton 11. Mailing Address 12. Telephone	
431 Beulah ave (850) 819-0357	
13. City 14. County 15. State 16. Zip Code 17. E-mail address	
Panama City Bay FI 32404 aaasinger@gmail.com	
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank 20. Address	
Panhandle Educators Federal Credit Union 2718 MLK Jr. Blvd	i ji Jaga jaga
21. City22. County23. State24. Zip CodePanamaa CityBayFI32405	: : :
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER	
DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.	
25. Date 26. Signature a Candidate	1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00
03/03/2020 X m S-10	100 100 100 100 100 100 100 100 100 100
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	ניות ד ניות
I,, do hereby accept the appointment (Please Print or Type Name)	nital Nation
designated above as: Campaign Treasurer Deputy Treasurer.	Vite
The 1.8 Off	esta tati tati
Date Signature of Campaign Treasurer or Deputy Treasurer DS-DE 9 (Rev. 10/10) Rule 1S-2.0001, F./	

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