

**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)

DAVID LEE HOLT

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

1511 MARSH POINT LN  
PANAMA CITY BEACH, FL 32413

**4. Telephone**

**5. E-mail address**

(850) 890-3190    bkinidavespcb@gmail.com

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

LAKE POWELL COMMUNITY  
DEVELOPMENT DISTRICT SEAT 1

**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**

ANN G. HENRY

**11. Mailing Address**

1511 MARSH POINT LANE

**12. Telephone**

(850) 819-8750

**13. City**

**14. County**

**15. State**

**16. Zip Code**

**17. E-mail address**

PCB

BAY

FL

32413

bkinidavespcb@gmail.com

**18. I have designated the following bank as my**

Primary Depository     Secondary Depository

**19. Name of Bank**

**20. Address**

CENTENNIAL BANK

12141 PANAMA CITY BEACH PARKWAY

**21. City**

**22. County**

**23. State**

**24. Zip Code**

PANAMA CITY BEACH BAY

FL

32413

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 Candidate**

6-10-2020

X Ann S. Henry

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

I, Ann S. Henry, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

6-10-2020  
Date

X Ann S. Henry  
Signature of Campaign Treasurer or Deputy Treasurer

DUVAL COUNTY 06122020 09:45