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 Party 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) code) HOUCHINS STALLE R 304 Shoreview Drive 4. Telephone 5. E-mail address DANAMA CHY FI, 32404 SUSO-UPB (USB) 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: Lynn Haven City Commissioner 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 No Party Affiliation Write-In ' candidate. Party Campaign Treasurer **Deputy Treasurer** 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer 12. Telephone 11. Mailing Address (850) 866. 15. State 16. Zip Code 17. E-mail address 18. I have designated the following bank as my **Primary Depository** Secondary Depository 19. Name of Bank 20. Address -anhandu Credit Union 21. City 22. County Haven 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 13 JAN 2021 N fed. 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) , do hereby accept the appointment (Please Print or Type Name) designated above as: Deputy Treasurer. Campaign Treasurer Campaign Treasurer or Deputy Treasurer

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

DS-DE 9 (Rev. 10/10)