## 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	OFFICE USE ONLY											
1. CHECK APPROPRIATE BOX(ES):												
✓ Initial Filing of Form	Re	-filing to Change:	: <u> </u>	Freasurer/	/Deputy	Depository		Office		Party		
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip							
Clair Y Pease					code) 10513 Front Beach Rd							
4. Telephone	-	Bldg	Bldg 2 Unit 103									
(850 ) 625-3422						Panama City Beach, FL 32407						
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if							
Bay County Commissioner, District 5					applicable:  My intent is to run as a Write-In candidate.							
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a												
Write-In No Party Affiliation Republican Party candidate.												
9. I have appointed the following person to act as my												
10. Name of Treasurer or Deputy Treasurer												
Wendy K White												
11. Mailing Address					12. Telephone							
1509 East 9th Avenue					( 813 ) 523-0326							
·				ate 16. Zip Code 17. E-mail address								
Tampa Hillsborough				33	33605 wendy@campaignaccounting.org							
18. I have designated the following bank as my												
19. Name of Bank		1	D. Address									
					South Belo							
21. City	ļ	22. County			23. State	}		24. Zip C	ode			
Largo		Pinellas			FL	W. W. C.		33777				
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 / - 3 - 2022 26. Signature of Canadidate									<u>*************************************</u>			
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27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I,do hereby accept the appointment										ıŧ		
(Please Print or Type Name)												
designated above as: X Campaign Treasurer Peputy Treasure												
11412022 X112010												
Date Signature of Campaign Treasurer or Deputy Treasurer												

**DS-DE 9 (Rev. 10/10)** 

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

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