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:	⊠ Tı	easu	rer/De	eputy [] Depository		Office	☐ Party		
2. Name of Candidate (in	1	3. Address (include post office box or street, city, state, zip										
Janice Louise Lucas					[code) 608 North Center Ave							
4. Telephone	5. E-ma	nail address										
(850)527-7760	50) 527-7760 lucastalk50@gmail.com					1 ranama ciny 72401						
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if												
Panama City Commission Ward 2						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 AffiliationParty candidate.												
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer												
10. Name of Treasurer or Deputy Treasurer												
Carolyn L. Zonia												
11. Mailing Address 12. Telephone												
620 Flatwoods forest Loop (950) 7(4-3793												
13. City			15. State		16. Zip Code 17. E-mail add				•			
Santa Rosa Beach Walton		ton	FL		32458 Zonia4sc			12@0	2@gmail.com			
18. I have designated the following bank as my												
19. Name of Bank 20. Address												
Centennial Bank					2200 Stanford Road							
21. City Panama City					23. State				24. Zip (
		Bay										
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							
2/27/2023					X ho I							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
ເ, Carolyກັ້L. Zonia						, do hereby accept the appointment						
(Please Print or Type Name)												
designated above as: Campaign Treasurer. Deputy Treasurer.												
2/27/2023 X C Zong												
Date			Signature of Campaign Treasurer or Deputy Treasurer									

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