

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)

Richard Thomas Walker

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

1106 Michigan Ave.
Lynn Haven, FL. 32444

4. Telephone

(850) 248 1106

5. E-mail address

@HOTMAIL.COM
RANDT Walker

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

Lynn Haven Seat
City Commissioner Dist. 2

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

Janet H. Walker

11. Mailing Address

1106 Michigan Ave Lynn Haven, FL.
32444

12. Telephone

(850) 248 1106

13. City

Lynn Haven

14. County

Bay

15. State

FL.

16. Zip Code

32444

17. E-mail address

RANDT Walker @HOTMAIL.COM

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

First Mark
Lynn Haven

20. Address

2395 S. Hwy 77 Lynn Haven

21. City

Lynn Haven

22. County

Bay

23. State

FL

24. Zip Code

32444

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

2/8/2023

26. Signature of Candidate

X [Signature]

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

I, Janet H. Walker, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer. ☐ Deputy Treasurer.

2-8-23

Date

X

[Signature]

Signature of Campaign Treasurer or Deputy Treasurer