

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

23
DADE COUNTY
FL

51
DADE COUNTY
FL

NOTE: This form must be on file with the filing 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):
(Please Print or Type Name)

Michael Brandon Caldwell

3. Address (include PO Box or Street, City, State, Zip Code):

210 Poinsettia Drive PCB, FL 32413

4. Telephone:

(850) 691-5195

5. Candidate's Voter Registration #:

115379060

(not required for qualifying purposes)

6. Email Address:

Caldwell18678@yahoo.com

7. Office Sought (include district, circuit, group, or seat #):

Beach Mosquito Control Commissioner Seat 2

8. If a candidate for a nonpartisan office, check the box if applicable:

☐ I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐ _____ Party candidate.

10. I have appointed the following person to act as my: ☒ Campaign Treasurer ☐ Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Michael Brandon Caldwell

12. Telephone:

(850) 691-5195

13. Email Address:

caldwell18678@yahoo.com

14. Mailing Address:

210 Poinsettia Drive

15. City:

Panama City Beach

16. State:

FL

17. Zip Code:

32413

18. I have designated the following bank as my (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

19. Name of Bank:

Regions Bank

20. Address:

Pier Park 11540 PCB Parkway 32407

21. City:

Panama City Beach

22. County:

Bay

23. State:

FL

24. Zip Code:

32413

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

5-9-24

26. Signature of Candidate:

X

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

I, Michael Brandon Caldwell do hereby accept the appointment designated above as:
(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date:

5-9-24

29. Signature of Campaign Treasurer or Deputy Treasurer

X