

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

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

(PLEASE PRINT OR TYPE)

2022 AUG -3 PM 12: 09

STOWARD COUNTY  
SUPERVISOR OF ELECTIONS

**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

AMENDED

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)

Chris Kapish

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

6750 NW 44 Street  
Coral Springs, FL 33067

**4. Telephone**

954 802-0536

**5. E-mail address**

CKAPISH@BellSouth.net

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

Turtle Run EDD Seat 1

**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**

Lynn Kapish

**11. Mailing Address**

6750 NW 44 St.

**12. Telephone**

(954) 8020536

**13. City**

Coral Springs

**14. County**

Broward

**15. State**

FL

**16. Zip Code**

33067

**17. E-mail address**

ckapish@bellsouth.net

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

Bank of America

**20. Address**

3200 University Dr.

**21. City**

Coral Springs

**22. County**

Broward

**23. State**

FL

**24. Zip Code**

33065

**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**

8-3-22

**26. Signature of Candidate**

X

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

I, Lynn Kapish, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer.     Deputy Treasurer.

8/3/22  
Date

X

Lynn Kapish  
Signature of Campaign Treasurer or Deputy Treasurer