

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

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

(PLEASE PRINT OR TYPE)

19 NOV 7 8:58AM

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)

*Lumon J May*

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

*1525 North J Street*

4. Telephone

*(850) 1723-9087*

5. E-mail address

*Lumonmay@BellSouth.net*

*Pensacola, FL 32501*

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

*County Commissioner  
District 3*

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     *Democratic* Party candidate.

9. I have appointed the following person to act as my  Campaign Treasurer     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

*Katherine McDaniel*

11. Mailing Address

*549 E Matador Trl*

12. Telephone

*(850) 1785-0283*

13. City

*Pensacola*

14. County

*Esambia*

15. State

*FL*

16. Zip Code

*32506*

17. E-mail address

*Katherineduckworth@yahoo.com*

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

19. Name of Bank

*The First*

20. Address

*40 N Palafox St*

21. City

*Pensacola*

22. County

*Esambia*

23. State

*FL*

24. Zip Code

*32502*

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

*11-7-19*

26. Signature of Candidate

*X Lumon J May*

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

I, *Katherine McDaniel*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*11-7-19*

Date

*X Katherine McDaniel*

Signature of Campaign Treasurer or Deputy Treasurer