

**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 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)

*Thomas S. Lottor*

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

*696 20th Avenue  
Vero Beach, FL 32962*

**4. Telephone:**

*(772) 473-8414*

**5. Candidate's Voter Registration #:**

(not required for qualifying purposes)

**6. Email Address:**

*veroash@AOL.com*

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

*Iron Pine Mosquito Control Board  
Seat 1*

**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:**

*Calvin Reams*

**12. Telephone:**

*(772) 562-4119*

**13. Email Address:**

*calvin.reams@fbic.com*

**14. Mailing Address:**

*7150-20th St*

**15. City:**

*Vero Beach*

**16. State:**

*FL*

**17. Zip Code:**

*32966*

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

**19. Name of Bank:**

*South State Bank*

**20. Address:**

*855 21st Street*

**21. City:**

*Vero Beach*

**22. County:**

*Iron Pine*

**23. State:**

*FL*

**24. Zip Code:**

*32960*

**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:**

*12/21/23*

**26. Signature of Candidate:**

*X [Signature]*

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

*Calvin D. Reams*

(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

**28. Date:**

*12/21/23*

**29. Signature of Campaign Treasurer or Deputy Treasurer**

*X [Signature]*

**APPOINTMENT OF CAMPAIGN TREASURER  
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**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form     Re-filing to Change:     Treasurer/Deputy     Depository     Office     Party

<p><b>2. Name of Candidate</b> (in this order: First, Middle, Last): (Please Print or Type Name)</p> <p><i>Thomas S. Lowther</i></p>	<p><b>3. Address</b> (include PO Box or Street, City, State, Zip Code):</p> <p><i>696 20<sup>th</sup> Avenue Vero Beach, FL 32912</i></p>
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<p><b>4. Telephone:</b></p> <p><i>(772) 473-8414</i></p>	<p><b>5. Candidate's Voter Registration #:</b> <small>(not required for qualifying purposes)</small></p>	<p><b>6. Email Address:</b></p> <p><i>verobeach@aol.com</i></p>
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<p><b>7. Office Sought</b> (include district, circuit, group, or seat #):</p> <p><i>ID Mosquito Control Seat 1</i></p>	<p><b>8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:</b></p> <p><input type="checkbox"/> I intend to run as a Write-In Candidate.</p>
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**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

<p><b>11. Name of Treasurer or Deputy Treasurer:</b></p> <p><i>Thomas S. Lowther</i></p>	<p><b>12. Telephone:</b></p> <p><i>(772) 473-8414</i></p>	<p><b>13. Email Address:</b></p> <p><i>verobeach@aol.com</i></p>
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<p><b>14. Mailing Address:</b></p> <p><i>696 20<sup>th</sup> Avenue</i></p>	<p><b>15. City:</b></p> <p><i>V.B.</i></p>	<p><b>16. State:</b></p> <p><i>FL.</i></p>	<p><b>17. Zip Code:</b></p> <p><i>32912</i></p>
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**18. I have designated the following bank as my (check appropriate box):**     Primary Depository     Secondary Depository

<p><b>19. Name of Bank:</b></p> <p><i>South State Bank</i></p>	<p><b>20. Address:</b></p> <p><i>855 21<sup>st</sup> Street</i></p>
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<p><b>21. City:</b></p> <p><i>Vero Beach</i></p>	<p><b>22. County:</b></p> <p><i>ID</i></p>	<p><b>23. State:</b></p> <p><i>FL.</i></p>	<p><b>24. Zip Code:</b></p> <p><i>32910</i></p>
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**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.**

<p><b>25. Date:</b></p> <p><i>12/21/23</i></p>	<p><b>26. Signature of Candidate:</b></p> <p><input checked="" type="checkbox"/> <i>[Signature]</i></p>
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**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate box)

I, *Thomas S. Lowther* do hereby accept the appointment designated above as:

(Please Print or Type Name)

Campaign Treasurer.                       Deputy Treasurer.

<p><b>28. Date:</b></p> <p><i>12/21/23</i></p>	<p><b>29. Signature of Campaign Treasurer or Deputy Treasurer</b></p> <p><input checked="" type="checkbox"/> <i>[Signature]</i></p>
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