

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

OFFICE USE ONLY

(PLEASE PRINT OR TYPE)

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Whitey DOIDGE

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

2903 E 9th St LEHI FL 33956

4. Telephone (optional)

(339) 369-8444

5. E-mail address (optional)

DOIDGEPAINTHER@AOL.COM

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

LAFD Commissioner SEAT 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

SELF

11. Mailing Address (If post office box or drawer, also include street address)

SAME AS ABOVE

12. Telephone

()

13. City

14. County

15. State

16. Zip Code

17. E-mail address (optional)

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

19. Name of Bank

SUN TRUST

20. Street Address

1110 HOWESTER RD N

21. City

LEHI

22. County

LEE

23. State

FL

24. Zip Code

33956

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

8-9-10

26. Signature of Candidate

X Whitey Doidge

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

I, Whitey Doidge, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

Campaign Treasurer Deputy Treasurer.

8-9-10

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

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**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

I, Whitey Doiose,

candidate for the office of LAFD Commissioner Seat # 2;

have received, read and understand the requirements of Chapter 106,

Florida Statutes.

X Whitey Doiose
Signature of Candidate

8-9-10
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).