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 qualifying

RECEIVED SUPERVISOR OF ELECTIONS

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officer before opening the campaign account.					OFFICE USE ONLY	
1. CHECK APPROPRIATE BOX	X(ES):			ja P		
✓ Initial Filing of Form	Re-filing to Change:	Treas	surer/Deputy	Depository	Office Party	
2. Name of Candidate (in this of	order: First, Middle, La	, I		de post office box c	or street, city, state, zip	
MEL PONDER			code) 133 HARBOR DR S			
4. Telephone 5. E	E-mail address		VENICE, FL 34285			
(941) 488-7794			, , , , , , , , , , , , , , , , , , , ,			
6. Office sought (include district, circuit, group number)			7. If a candidate for a <u>nonpartisan</u> office, check if			
OKALOOSA COUNTY CO	applica		Write In condidate			
	<u> </u>				n 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	y Affiliation 🔀	REPUBL	_ICAN		Party candidate.	
9. I have appointed the follow	ving person to act as	s my 🔀	Campaign Trea	asurer Der	outy Treasurer	
10. Name of Treasurer or Deputy Treasurer						
ERIC ROBINSON						
11. Mailing Address				12. Te	elephone	
133 S HARBOR DR (941) 488-7794						
•			16. Zip Code			
VENICE SARASOTA FL		FL	34285 eric@robinsongruters.com			
18. I have designated the following bank as my						
19. Name of Bank			. Address			
SYNOVUS BANK 84910 EMERALD COAST PKWY.						
21. City	22. County		23. State	l .	24. Zip Code	
DESTIN	OKALOOSA		FL		32541	
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	***************************************	26	. Şignature of Car	ndidate	×	
9/10/19		X	Mee	for		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)						
I,, do hereby accept the appointment						
(Please Print or Type Name)						
designated above as: Campaign Treasurer Deputy Treasurer.						
9/12/19 X W						
Date	7' 1 -	Sic	of Campa	ign Treasurer or Dei	nuty Treasurer	

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

SUPPRISOR OF ELECTIONS

I, MEL PONDER ,					
candidate for the office of OKALOOSA COUNTY COMMISSION, DIST. 5;					
have been provided access to read and understand the requirements of					
Chapter 106, Florida Statutes.					
X Signature of Candidate Q 10 19 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).