

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

RECEIVED
SUPERVISOR OF ELECTIONS

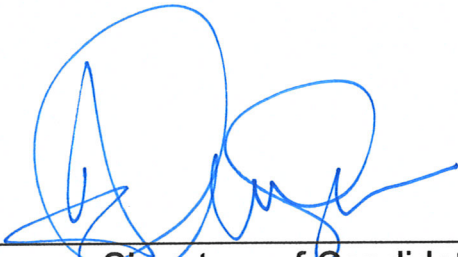
2020 JAN -3 A 9:19

I, Angela D. Mason,

candidate for the office of County Court Judge;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

1.3.20

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).

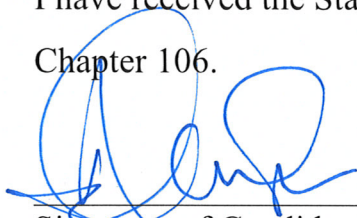
RECEIVED
SUPERVISOR OF ELECTIONS

2020 JAN -3 A 9 19

NOTICE TO: CANDIDATES
FROM: PAUL LUX
SUPERVISOR OF ELECTIONS
SUBJECT: STATEMENT OF CANDIDATE REQUIREMENT

I have filed an appointment of campaign treasurer form and understand that, within ten days, I am required to read Chapter 106 of the Florida Statutes and file a Statement of Candidate with the Supervisor of Elections office.

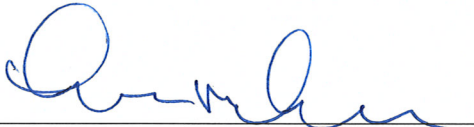
I have received the Statement of Candidate form and have been provided access to Chapter 106.



Signature of Candidate

1.3.20 .

Today's Date



Supervisor of Elections / Deputy

Due Date:



Okaloosa County Supervisor of Elections

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

(Section 105.031(5), F.S.)

(Please Type)

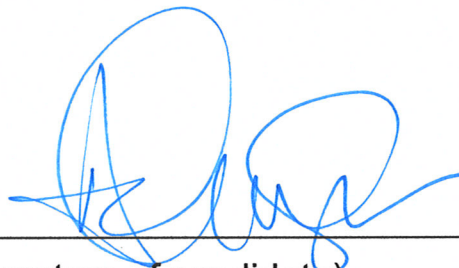
OFFICE USE ONLY

RECEIVED
SUPERVISOR OF ELECTIONS

2020 JAN -3 A 9:18

I, Angela D. Mason

a judicial candidate, have received, read, and understand the requirements of the Florida Code of Judicial Conduct.



(Signature of candidate)

1.3.20

(Date)

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.

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

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

(PLEASE PRINT OR TYPE)

RECEIVED
SUPERVISOR OF ELECTIONS

2020 JAN -3 A 9:19

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)

Angela D. Mason

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

1940 Lewis Turner Blvd.
Suite 3-414
FWB, FL 32547

4. Telephone

(904) 309-2442

5. E-mail address

admason5@yahoo.com

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

Okaloosa County Court Judge

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

Angela D. Mason

11. Mailing Address

1940 Lewis Turner Blvd., Suite 3-414, FWB, FL 32547

12. Telephone

(904) 309-2442

13. City

FWB

14. County

Okaloosa

15. State

FL

16. Zip Code

32547

17. E-mail address

admason5@yahoo.com

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

19. Name of Bank

20. Address

21. City

22. County

23. State

24. Zip Code

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

1.3.20

26. Signature of Candidate

X

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

I, Angela D. Mason, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1.3.20

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

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

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

(PLEASE PRINT OR TYPE)

RECEIVED
SUPERVISOR OF ELECTIONS
STATE OF FLORIDA

2020 JAN -3 A 9:19

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)

Angela D. Mason

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

1940 Lewis Turner Blvd.
Suite 3-414
FWB, FL 32547

4. Telephone

(904) 309-2442

5. E-mail address

admason5@yahoo.com

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

Okaloosa County Court Judge.

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

Amanda Gordon

11. Mailing Address

3 Warwick Dr.

12. Telephone

(850) 218-7300

13. City

Shalimar

14. County

Okaloosa

15. State

FL

16. Zip Code

32579

17. E-mail address

wabi.sabi.mommi@gmail.com

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

19. Name of Bank

FNBT

20. Address

29 Eglin Pkwy. NE

21. City

FWB

22. County

Okaloosa

23. State

FL

24. Zip Code

32548

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

1.3.20

26. Signature of Candidate

X

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

I, Amanda Gordon, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1/3/20

Date

X

Signature of Campaign Treasurer or Deputy Treasurer