

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

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

(PLEASE PRINT OR TYPE)

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2024 APR 26 P 3:48

OFFICE USE ONLY

NOTE: This form must be on file with the filing officer before opening the campaign account.

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)

Mary Anne Windes

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

PO Box 632
Destin, FL 32540

4. Telephone:

(850) 803-2211

5. Candidate's Voter Registration #:

106120563
(not required for qualifying purposes)

6. Email Address:

maryannewindes@gmail.com

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

District 5 Okaloosa
County Commission

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. Republican Party candidate.

10. I have appointed the following person to act as my:

Campaign Treasurer Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Jennifer Nichols

12. Telephone:

(850) 217-5172

13. Email Address:

Jennifer.HarrisonNichols@gmail.com

14. Mailing Address:

52 Shalimar Drive

15. City:

Shalimar

16. State:

FL

17. Zip Code:

32579

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

19. Name of Bank:

Regions Bank

20. Address:

100 Main Street

21. City:

Destin

22. County:

Okaloosa

23. State:

FL

24. Zip Code:

32541

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:

4-26-24

26. Signature of Candidate:



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

I, Jennifer Nichols

(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

28. Date:

4-26-24

29. Signature of Campaign Treasurer or Deputy Treasurer



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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. Willful failure to file the Statement of Candidate form is a misdemeanor of the first degree, punishable as provided in 775.082 of the Florida Statutes.


Signature of Candidate


Today's Date


Supervisor of Elections / Deputy

Due Date:

May 6, 2023



Okaloosa County Supervisor of Elections

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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SUPERVISOR OF ELECTIONS

2024 APR 26 P 4: 25

I, Mary Anne Windes,
candidate for the office of District 5 Okaloosa
County Commissioner

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

X Mary Anne Windes
Signature of Candidate

4-26-24
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).