

**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.

COMMISSIONER OF REGISTRATION

2024 MAY 22 AM 11:20

WEST PALM BEACH COUNTY, FL

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)

Samuel L. Thompson

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

§119.071(4)(d)2.a

**4. Telephone:**

§119.071(4)(d)2.a

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

112531688

(not required for qualifying purposes)

**6. Email Address:**

VoteSamuelL.Thompson@gmail.com

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

Clerk of Circuit Court and Comptroller

**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:**

Samuel L. Thompson

**12. Telephone:**

§119.071(4)(d)2.a

**13. Email Address:**

usamuelaa@myself.com

**14. Mailing Address:** exempt F.S. 119.071

§119.071(4)(d)2.a

**15. City:**

§119.071(4)(d)2.a

**16. State:**

§119.071(4)(d)2.a

**17. Zip Code:**

§119.071(4)(d)2.a

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

**19. Name of Bank:**

TRUIST

**20. Address:**

540 Village Blvd.

**21. City:**

West Palm Beach

**22. County:**

Palm Beach

**23. State:**

FL

**24. Zip Code:**

33411

**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:** 22 MAY 2024

**26. Signature of Candidate:**

X

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

I, Samuel L. Thompson do hereby accept the appointment designated above as:

(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

**28. Date:** 22 MAY 2024

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

X

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

## OFFICE USE ONLY

CURTIS J. JAMES

2024 MAY 22 AM 11:20

PALM BEACH COUNTY, FL

I, Samuel L. Thompson,

candidate for the office of Clerk of CirCuit Court and Comptroller;

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

X   
Signature of Candidate

22 MAY 2024  
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).