

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

SUPERVISOR OF ELECTIONS

2020 MAY 29 PM 2:09

PALM BEACH COUNTY, FL

(PLEASE PRINT OR TYPE)

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)

MICHAEL JOSEPH WHALEN

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

7150 HIGH SIENNA CR  
WEST PALM BCH FL 33411

4. Telephone

(561) 801-2571

5. E-mail address

MICHAELJ15@ATT.NET

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

PORT COMMISSIONER GRP 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

MICHAEL J WHALEN

11. Mailing Address

7150 HIGH SIENNA CR.

12. Telephone

(561) 801-2571

13. City

WEST PALM BCH

14. County

PALM

15. State

FL

16. Zip Code

33411

17. E-mail address

MICHAELJ15@ATT.NET

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

19. Name of Bank

BANK OF AMERICA

20. Address

6830 OKEECHOBEE BL. W PR FL 33411

21. City

WEST PALM BEACH

22. County

PALM BEACH

23. State

FL.

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

5-29-20

26. Signature of Candidate

X 

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

I, MICHAEL J WHALEN, do hereby accept the appointment

(Please Print or Type Name)

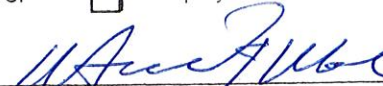
designated above as:

Campaign Treasurer     Deputy Treasurer.

5-29-20

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

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

OFFICE USE ONLY

SUPERVISOR OF ELECTIONS

2020 MAY 29 PM 2: 03

PALM BEACH COUNTY, FL

I, MICHAEL JOSEPH WHALEN,  
candidate for the office of PORT COMMISSIONER GROUP 2,

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

X   
Signature of Candidate

5-29-20  
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).