

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2022 MAY 31 AM 11:50

PALM BEACH COUNTY, FL

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) **Marcia Smark Woodward**

3. Address (include post office box or street, city, state, zip code) **960 NW 9th St.
Boca Raton, FL 33486**

4. Telephone **(561) 392-2992**

5. E-mail address **marciaswoodward@gmail.com**

6. Office sought (include district, circuit, group number) **County Commission
District 4**

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 **Republican** 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 O. Woodward**

11. Mailing Address **960 NW 9th Street**

12. Telephone **(561) 392-2992**

13. City **Boca Raton**

14. County **Palm Beach**

15. State **FL**

16. Zip Code **33486**

17. E-mail address **michaelowoodward@gmail.com**

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

19. Name of Bank **Seacoast Bank**

20. Address **2300 Glades Rd Suite 140**

21. City **Boca Raton**

22. County **Palm Beach**

23. State **FL**

24. Zip Code **33431**

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 **May 31, 2022**

26. Signature of Candidate **X Marcia S. Woodward**

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)
I, **MICHAEL O. WOODWARD**, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

05-31-2022
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

2022 MAY 31 AM 11:52

PALM BEACH COUNTY, FL

I, Marcia Smoak Woodward,
candidate for the office of County Commission District 4
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Marcia S. Woodward
Signature of Candidate

5-31-2022
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).