

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

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

(PLEASE PRINT OR TYPE)

2024 MAY 31 AM 10:59

NOTE: This form must be on file with the filing 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):
(Please Print or Type Name)

Rhett Alexander Rowell

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

4533 Carr Rd
Jay, FL 32565

4. Telephone:

(850) 206-9878

5. Candidate's Voter Registration #:

107575408

(not required for qualifying purposes)

6. Email Address:

rhett@rhettrowell.com

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

SRC COMMISSION, DISTRICT 3

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:

Tracy A Roberts

12. Telephone:

(850) 572-7593

13. Email Address:

tracy.roberts11@yahoo.com

14. Mailing Address:

4998 Beck Ave

15. City:

Jay

16. State:

FL

17. Zip Code:

32565

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

19. Name of Bank:

Santa Rosa County Federal Credit Union

20. Address:

5909 Stewart Street

21. City:

Milton

22. County:

Santa Rosa

23. State:

FL

24. Zip Code:

32565

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:

5/31/24

26. Signature of Candidate:

X Rhett Rowell

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

I, Tracy Roberts do hereby accept the appointment designated above as:
(Please Print or Type Name)

☐ Campaign Treasurer.

☒ Deputy Treasurer.

28. Date:

5/31/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X Tracy A. Roberts