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

(PLEASE PRINT OR TYPE)

SUPERV ... 64 5 CAP ... MILTON, FL 32570-4532
2010 MAR 9 PM 3 17

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX:
☒ Original Appointment Change in: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

2. **Name of Candidate** (in this order: First, Middle, Last)
Henrietta M. "Etta" Lawlor

3. Address (include post office box or street, city, state, zip code)
2532 Cedarcrest Lane
Navarre, FL 32566

4. Telephone (optional)
(850) 939-9444

5. E-mail address (optional)

6. **Office sought** (include district, circuit, group number)
Santa Rosa County Commissioner - 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 ☐ _____ Party candidate.

9. **I have appointed the following person to act as my** ☒ Campaign Treasurer ☐ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer
Henrietta M. Lawlor

11. Mailing Address (If post office box or drawer, also include street address)
2532 Cedarcrest Lane

12. Telephone
(850) 939-9444

13. City: Navarre
14. County: Santa Rosa
15. State: FL
16. Zip Code: 32566
17. E-mail address (optional)

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

19. Name of Bank
Regions Bank

20. Street Address
8234 Navarre Pkwy

21. City: Navarre
22. County: Santa Rosa
23. State: FL
24. Zip Code: 32566

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
3/9/10

26. Signature of Candidate
X Henrietta M. Lawlor

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

I, Henrietta M. Lawlor, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

3/9/10
Date

X Henrietta M. Lawlor
Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 11/09)