

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS
6495 CAROLINE ST., STE. F
MILTON, FL 32570-4592

2014 MAR 7 PM 4 12

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)

Henrietta M. Lawlor

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

2532 Cedarcrest Ln
Navarre, FL 32566

4. Telephone

(850) 939-9444

5. E-mail address

ettalawlor@mediacombb.net

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 Libertarian Party of Florida (LPF) 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

2532 Cedarcrest Ln

12. Telephone

(850) 939-9444

13. City

Navarre

14. County

Santa Rosa

15. State

FL

16. Zip Code

32566

17. E-mail address

ettalawlor@mediacombb.net

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

19. Name of Bank

Pen Air Federal Credit Union

20. Address

3591 Gulf Breeze Pkwy

21. City

Gulf Breeze

22. County

Santa Rosa

23. State

FL

24. Zip Code

32563

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

March 7, 2014

26. Signature of Candidate

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.

March 7, 2014

Date

Henrietta M. Lawlor
Signature of Campaign Treasurer or Deputy Treasurer