

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

(PLEASE TYPE)

OFFICE USE ONLY

2007 SEP 31 AM 9:39

MARIN JENSEN
SUPERVISOR OF
ELECTIONS

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate <i>STEPHEN P. JORDAN</i>	1. Address (include post office box or street, city, state, zip code) <i>257 HUGH THOMAS DR. Callaway Fl 32404</i>
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Telephone (optional) <i>(850) 819 3361</i>	2. Party (Partisan candidates only)	3. Office (add district, circuit, group number) <i>Callaway City Commission Ward 3</i>
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I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer
STEPHEN P. JORDAN

5. Mailing Address (If post office box or drawer add street address) <i>257 HUGH THOMAS DR.</i>	6. Telephone <i>850-819-3361</i>
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7. City <i>Callaway</i>	8. County <i>Bay</i>	9. State <i>FL</i>	10. Zip Code <i>32404</i>
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I have designated the following named bank as my Primary Depository Secondary Depository

11. Name of Bank <i>Regions Bank</i>	12. Street Address <i>103 S. Tyndall Pkwy</i>
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13. City <i>Callaway</i>	14. County <i>Bay</i>	15. State <i>FL</i>	16. Zip Code <i>32404</i>
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17. Signature of Candidate <i>X Stephen P. Jordan</i>	Date <i>Oct 1 2007</i>
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Campaign Treasurer's Acceptance of Appointment

I, *STEPHEN P. JORDAN*, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of *STEPHEN P. JORDAN*

who is seeking nomination or election as a _____ candidate to the office of
(Party)

Callaway City Commission Ward 3 . As a duly registered voter in *Bay*

County, Florida, I am qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

Oct 1 2007
Date

X Stephen P. Jordan
Signature of Campaign Treasurer or Deputy Treasurer