STATE OF FLORIDA

| AND DESIGNATION DEPOSITORY FOR (Section 106.0) | R CANDIDATES | | | | | | |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------|------------------|-------------------------|------------------|--|
| (PLEASE | TYPE) | | | | | | |
| CHECK APPROPRIATE BOX: | | | | , . , | | | |
| ✓ Original Appointment | Deputy Treasurer | Reappo | Reappointment of Treasurer Secondary Depository | | | | |
| Name of Candidate Mary Ann Gardner | Address (include post office box or street, city, state, zip code) 1543 Kraft Ave Panama City, Fl 32405 | | | | | | |
| Telephone (optional) 2. P (850) 872-9302 no | ıly) | 3. Office (add district, circuit, group number) Commission Seat 4 | | | | | |
| I have appointed the following per | rson to act as my | mpaign Trea | surer | Deputy | Treasurer | | |
| 4. Name of Treasurer or Deputy T Mary Ann Gardner | reasurer | | | | | | |
| 5. Mailing Address (If post office be 1543 Kraft Ave | ess) | | | | lephone 1-872-9302 | | |
| 7. City Panama City | 8. County Bay | 9. State Florida | | | 10. Zip Code 32405 | | |
| I have designated the following na | amed bank as my | mary Deposi | tory | Secondary | Depository | | |
| 11. Name of Bank Peoples Bank | | 12. Street Address 1038 Harrison Ave | | | | | |
| 13. City Panama City | 14. County Bay | 15. State Florida | | | 16. Zip Code 32401 | | |
| 17. Signature of Candidate **Mary (unit | Gerdner | | | | Date 2 - 2 | 6-07 | |
| (Ca | mpaign Treasurer's | Acceptan | ce of Ap | pointmer | nt | | |
| 1, | | | , do he | ereby accept the | e appointment as | | |
| ✓ Campaign Treasurer | Deputy Treasurer for th | ne campaign o | of | Mary A | ınn Gardn | er 👖 , | |
| who is seeking nomination or election as a | | | rtisan | | candidate | to the office of | |
| Commission Seat 4 | As a du | Parl) uly registered | • * | | | | |
| County, Florida, I am qualified to | accept this appointment. | | | | | T T | |
| | ERJURY, I DECLARE THAT ANCE OF APPOINTMENT A | | | | | ASURER'S | |
| 12 -26-07 Date | X | 111arl Signaturé | Jenn of Campaig | gn Treasurer | S JNE or Deputy Trea | asurer / F 22 | |

OFFICE USE ONLY