

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

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

(PLEASE PRINT OR TYPE)

CITY CLERK

8 MAR'22 AM 8:40:50

CITY OF NORTH PORT

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)

Philip M STOKES

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

*20210 Lagente Circle
Northport FL 34293*

4. Telephone

(941) 281-0598

5. E-mail address

wiseplh12000@yahoo.com

6. Office sought (include district, circuit, group number)

*DISTRICT 5 Commissioner
Northport*

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

Philip Stokes

11. Mailing Address

20210 Lagente Circle

12. Telephone

(941) 281-0598

13. City

Northport

14. County

SARASOTA

15. State

FL

16. Zip Code

34293

17. E-mail address

wiseplh12000@yahoo.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

TRUST

20. Address

Jacaranda Blvd

21. City

Venice

22. County

SARASOTA

23. State

FL

24. Zip Code

34293

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

3/8/22

26. Signature of Candidate

X [Signature]

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

I, *Philip STOKES*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3/8/22

Date

X

[Signature]

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

CITY CLERK

8 MAR'22 AM 8:40:59

CITY OF NORTH PORT

I, Philip Stokes,

candidate for the office of DISTRICT 5 COMMISSIONER;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

3/8/22

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).