

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

Received

NOV 28 2022

Council/Clerk

I, Lindsay R. Hall Harrison,  
candidate for the office of City Council Seat 4;

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

X

  
Signature of Candidate

10/28/2022  
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).

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

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

(PLEASE PRINT OR TYPE)

Received  
NOV 28 2022  
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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)

Lindsay R. Hall Harrison

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

111 Woodstream Ct.

Maitland FL 32751

4. Telephone

(503) 504-3925

5. E-mail address

Lindsay@lawandtitle.com

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

City Council, Seat 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

Lindsay Hall Harrison

11. Mailing Address

111 Woodstream Ct.

12. Telephone

( )

13. City

Maitland

14. County

ORANGE

15. State

FL

16. Zip Code

32751

17. E-mail address

Lindsay@lawandtitle.com

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

19. Name of Bank

Ally Bank

20. Address

P.O. Box 951

21. City

Horsham

22. County

23. State

PA

24. Zip Code

19044

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

11/28/2022

26. Signature of Candidate

X



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

I, Lindsay Hall Harrison, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

Campaign Treasurer.

Deputy Treasurer.

11/28/22  
Date

X

  
Signature of Campaign Treasurer or Deputy Treasurer