

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

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

(PLEASE PRINT OR TYPE)

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SUPERVISOR OF ELECTIONS  
2023 FEB -1 AM 8:45

**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)  
Marcus Daniel Chambers

3. **Address** (include post office box or street, city, state, zip code)  
592 Tulip Tree Way  
Niceville, FL 32578

4. **Telephone**  
( 850 ) 687-9818

5. **E-mail address**  
chambers25marcus@gmail.com

6. **Office sought** (include district, circuit, group number)  
Superintendent of Schools

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     Republican Party candidate.

9. **I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

10. **Name of Treasurer or Deputy Treasurer**  
Amber Floyd

11. **Mailing Address**  
606 Kilcullen Dr

12. **Telephone**  
( 850 ) 502-7297

13. **City**  
Niceville

14. **County**  
Okaloosa

15. **State**  
FL

16. **Zip Code**  
32578

17. **E-mail address**  
3ugagirls@gmail.com

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

19. **Name of Bank**  
FNBT Bank

20. **Address**  
29 North Eglin Parkway

21. **City**  
Fort Walton Beach


22. **County**  
Okaloosa

23. **State**  
FL

24. **Zip Code**  
32548

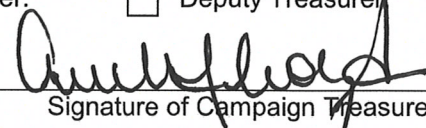
**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

25. **Date**  
2/1/2023

26. **Signature of Candidate**  
 

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
I, Amber Floyd, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer.     Deputy Treasurer

2/1/2023         
Date      Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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I, Marcus D. Chambers ,

candidate for the office of Superintendent of Schools ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



\_\_\_\_\_  
Signature of Candidate

2/1/2023

\_\_\_\_\_  
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).