

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

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

(PLEASE PRINT OR TYPE)

RECEIVED
SUPERVISOR OF ELECTIONS
LEON COUNTY, FLORIDA

2026 JAN 16 PM 1:26

NOTE: This form must be on file with the filing 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):
(Please Print or Type Name)

Michael Shawn Foust

3. Address (include PO Box or Street, City, State, Zip Code):

2514 Old Bainbridge Rd.
Tallahassee, FL

4. Telephone:

(850) 273-1717

5. Candidate's Voter Registration #:

105 189 355

(not required for qualifying purposes)

6. Email Address:

Mike@Foust.com

7. Office Sought (include district, circuit, group, or seat #):

Tallahassee City Commission Seat 4 / Mayor

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. _____ Party candidate.

10. I have appointed the following person to act as my:

Campaign Treasurer

Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Michael Foust

12. Telephone:

(850) 273 1717

13. Email Address:

Mike@Foust.com

14. Mailing Address:

2514 Old Bainbridge Rd

15. City:

Tallahassee

16. State:

FL

17. Zip Code:

32303

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

Capital City Bank

20. Address:

1456 Capital Circle NW

21. City:

Tallahassee

22. County:

Leon

23. State:

FL

24. Zip Code:

32303

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

25. Date:

January 16, 2026

26. Signature of Candidate:

X Michael Foust

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

I, Michael Foust
(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

28. Date:

January 16, 2026

29. Signature of Campaign Treasurer or Deputy Treasurer

X Michael Foust

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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I, Mike Foust,
candidate for the office of Tallahassee City Commission, Seat 4/Mayor;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Michael Foust
Signature of Candidate

1/16/26
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).

AFFIDAVIT OF UNDUE BURDEN

RECEIVED
SUPERVISOR OF ELECTIONS
LEON COUNTY, FLORIDA

FOR CANDIDATES 2026 JAN 16 PM 1:40

Notice: An undue burden affidavit may be filed by a candidate seeking to qualify if paying the charges to verify signatures pursuant to section 99.097(4)(a)-(b), Florida Statutes, would impose an undue burden on personal resources or other resources otherwise available to such candidate.

If any person is paid to solicit signatures on a petition, an undue burden oath may not be subsequently filed in lieu of paying the fees to verify the petition. If an undue burden oath has been filed and payment is subsequently made to any person to solicit signatures on a petition, the undue burden oath is no longer valid and a fee for all signatures previously submitted to the supervisor of elections and any that are submitted thereafter shall be paid. See s. 99.097(6), Florida Statutes.

(1) If contributions as defined in section 106.011, Florida Statutes, are received, any monetary contributions must first be used to reimburse the supervisor of elections for any signature verification fees that were not paid because of the filing of an undue burden oath. (2) Any candidate who qualified by the petition process and who has surplus funds, must first apply the surplus funds to the reimbursement of the signature verification fee (if applicable) upon terminating the campaign. See s. 106.141(7), Florida Statutes.

I certify under oath that I intend to qualify as a candidate for the office of Tallahassee City Commission Seat 4/mayor and that I am unable to pay the fee for verification of petition signatures for that office without imposing an undue burden on my personal resources or on resources otherwise available to me.

Michael Foust
Print Name

X Michael Foust
Signature

2514 Old Bainbridge Rd
Address

Tallahassee
City

FL 32303
State Zip

850 273 1717
Telephone Number

STATE OF FLORIDA
COUNTY OF Leon

Maribel Rivera
Signature of Notary Public

Print, Type or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me
by means of online notarization
or physical presence
this 16 day of January, 2026
Personally Known or Produced identification
Type of Identification Produced: FL DL

