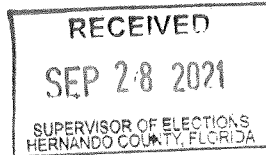


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)



**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) **JAMES SCAUETTA**  
 3. Address (include post office box or street, city, state, zip code) **9267 HORIZON DR. SPRING HILL, FL 34608**  
 4. Telephone **(352) 556-1415**  
 5. E-mail address **SHADOWHAWK@GMAIL.COM**

6. Office sought (include district, circuit, group number) **COUNTY COMMISSIONER DIST. 2**  
 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 **CONSTANCE SCAUETTA**

11. Mailing Address **9267 HORIZON DR.**  
 12. Telephone **(352) 835-7372**

13. City **SPRING HILL**    14. County **HERNANDO**    15. State **FL**    16. Zip Code **34608**    17. E-mail address **LADYGUNSLINGER7@GMAIL.COM**

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

19. Name of Bank **MID FLORIDA**  
 20. Address **11098 SPRING HILL DR.**

21. City **SPRING HILL**    22. County **HERNANDO**    23. State **FL**    24. Zip Code **34608**

**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 **8/23/2021**  
 26. Signature of Candidate **X James Scauetta**

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

I, **CONSTANCE SCAUETTA**, do hereby accept the appointment  
 (Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

**8/23/2021** Date      **X Constance Scauetta** Signature of Campaign Treasurer or Deputy Treasurer