

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

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

(PLEASE PRINT OR TYPE)

REC'D SOE JAN 8 '20 PM 4:20

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)

Monique Marie Scott

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

401 North Howard Ave  
Tampa, FL 33606

**4. Telephone**

(813) 768-4834

**5. E-mail address**

monique.scottlaw@gmail.com

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

County Court Judge, Group 7

**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**

Monique Scott

**11. Mailing Address**

401 North Howard Ave

**12. Telephone**

(813) 768-4834

**13. City**

Tampa

**14. County**

Hillsborough

**15. State**

FL

**16. Zip Code**

33606

**17. E-mail address**

monique.scottlaw@gmail.com

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

**19. Name of Bank**

Bank of America

**20. Address**

3030 W. Kennedy Blvd

**21. City**

Tampa

**22. County**

Hillsborough

**23. State**

FL

**24. Zip Code**

33606

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**

1/3/20

**26. Signature of Candidate**

X 

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

I, Monique Scott, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer    ☒ Deputy Treasurer.

1/3/20

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer