

**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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**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)

Kimberly Dianne Overman

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

4610 N. Central Avenue  
Tampa, FL 33603

**4. Telephone**

(813 ) 720-7719

**5. E-mail address**

vote@kimberlyoverman.com

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

Hillsborough County Commission, District 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     Democratic Party candidate.

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

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

Jonathan Brill

**11. Mailing Address**

701 S. Howard Avenue #106-813

**12. Telephone**

( 813 ) 733-0070

**13. City**

Tampa

**14. County**

Hillsborough

**15. State**

FL

**16. Zip Code**

33606

**17. E-mail address**

jonathan@calsolutionsgroup.com

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

**19. Name of Bank**

BANK OF AMERICA

**20. Address**

P.O. BOX 25118

**21. City**

TAMPA

**22. County**

HILLSBOROUGH

**23. State**

FLORIDA

**24. Zip Code**

33622-5118

**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**

06/11/2021

**26. Signature of Candidate**

*X Kimberly Overman*

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

I, Jonathan Brill do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

6/14/2021

Date

*X Jonathan Brill*  
Signature of Campaign Treasurer or Deputy Treasurer