

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2017 APR 17 AM 11:41

MANATEE COUNTY
SUPERVISOR OF ELECTIONS

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)

Robin SUE DiSabatino

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

6647 41st St Cir E
Sarasota, FL 34243

4. Telephone

(941) 685-5368

5. E-mail address

Vote4robind@gmail.com

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

MANATEE COUNTY BOARD OF
COUNTY COMMISSIONERS DISTRICT 4

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

DR. ROBERT M. DISABATINO

11. Mailing Address

6647 41st St Cir E, Sarasota, FL 34243

12. Telephone

(941) 228-6254

13. City

Sarasota

14. County

Manatee

15. State

FL

16. Zip Code

34243

17. E-mail address

Bobdisab@gmail.com

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

19. Name of Bank

BANK OF AMERICA

20. Address

5315 39th St E

21. City

Bradenton

22. County

Manatee

23. State

FL

24. Zip Code

34203

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

April 17, 2017

26. Signature of Candidate

X

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

I, DR. ROBERT M. DISABATINO, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/17/2017
Date

X

Signature of Campaign Treasurer or Deputy Treasurer