I do not intend to receive or spend funds for my campaign

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MANATEE COUNTY
SUPERVISOR OF ELECTIONS

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) Lainie Leighann Lowery	3. Address (include post office box or street, city, state, zip code) 2715 Terra Ceia Bay Blvd, Unit 203 Palmetto, FL 34221
4. Telephone (850) 933-5177	5. E-mail address lainielowery@aol.com
6. **Office sought** (include district, circuit, group number) Palms of Terra Ceia Bay CDD, Seat 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 ☐ _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer				
11. Mailing Address				12. Telephone ( )
13. City	14. County	15. State	16. Zip Code	17. E-mail address

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

19. Name of Bank		20. Address	
21. City	22. County	23. State	24. Zip Code

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 06/01/2020	26. Signature of Candidate X Lainie Lowery

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

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

designated above as: ☐ Campaign Treasurer ☐ Deputy Treasurer.

_____ X _____
Date Signature of Campaign Treasurer or Deputy Treasurer