

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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2021 SEP 20 AM 10:16

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)

CHARLES B SMITH

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

1701 4TH AVE WEST  
PALMETTO FL. 34221

4. Telephone

(941) 720-3013

5. E-mail address

SLCCHARLES@AOL.COM

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

MANATEE COUNTY COMMISSION DISTRICT (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     DEMOCRAT Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

CHARLES B SMITH

11. Mailing Address

1701 4TH AVE WEST

12. Telephone

(941) 720-3013

13. City

PALMETTO

14. County

MANATEE

15. State

FL

16. Zip Code

34221

17. E-mail address

SLCCHARLES@AOL.COM

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

19. Name of Bank

SOUTHSTATE BANK

20. Address

410 5TH AVE WEST

21. City

PALMETTO

22. County

MANATEE

23. State

FLORIDA

24. Zip Code

34221

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

09-20-2021

26. Signature of Candidate

X Charles B Smith

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

I, CHARLES B SMITH, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

09-20-2021  
Date

X Charles B Smith  
Signature of Campaign Treasurer or Deputy Treasurer