

**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 filing officer before opening the campaign account.

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MANATEE COUNTY  
SUPERVISOR OF ELECTIONS  
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):  
(Please Print or Type Name)

April Culbreath

**3. Address** (include PO Box or Street, City, State, Zip Code):

[REDACTED]

**4. Telephone:**

(813 ) 920-5780

**5. Candidate's Voter Registration #:**

111 040387

(not required for qualifying purposes)

**6. Email Address:**

voteaprilmanatee@gmail.com

**7. Office Sought** (include district, circuit, group, or seat #):

Manatee County Commission District 3

**8. If a candidate for a nonpartisan office, check the box if applicable:**

☐ I intend to run as a Write-In Candidate.

**9. If a candidate for partisan office, check the box and fill in the name of the party as applicable:** I intend to run as a

☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☒ Republican Party candidate.

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

**11. Name of Treasurer or Deputy Treasurer:**

Wendy White

**12. Telephone:**

(813 ) 523-0326

**13. Email Address:**

wendy@campaignaccounting.org

**14. Mailing Address:**

1509 E 9th Ave

**15. City:**

Tampa

**16. State:**

FL

**17. Zip Code:**

33605

**18. I have designated the following bank as my** (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

**19. Name of Bank:**

The Bank of Tampa

**20. Address:**

10980 South Belcher Rd

**21. City:**

Largo

**22. County:**

Pinellas

**23. State:**

FL

**24. Zip Code:**

33777

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

**25. Date:**

June 6<sup>th</sup>, 2024

**26. Signature of Candidate:**

X [Signature]

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

I, Wendy White do hereby accept the appointment designated above as:  
(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

**28. Date:**

June 6, 2024

**29. Signature of Campaign Treasurer of Deputy Treasurer**

X [Signature]