

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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2024 JUN 14 AM 8:57

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)

PERRI ANN PARKMAN

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

803 GLADIOLUS ST
ANNA MARIA, FL, 34216

4. Telephone:

(714) 505-2566

5. Candidate's Voter Registration #:

129526725

(not required for qualifying purposes)

6. Email Address:

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

MANATEE COUNTY SCHOOL BOARD 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. ☐ _____ Party candidate.

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

11. Name of Treasurer or Deputy Treasurer:

CHRISTOPHER LICATA III

12. Telephone:

(727) 507 1152

13. Email Address:

CHRIS@THEPOLYSTANDARD.COM

14. Mailing Address:

4163 AUTUMN AMBER DR

15. City:

SPRING HILL

16. State:

FL

17. Zip Code:

34601

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

19. Name of Bank:

SOUTH STATE BANK

20. Address:

900 53RD AVE 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 THE APPOINTMENT OF THE
CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

06/14/2024

26. Signature of Candidate:

X 

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

I, CHRIS LICATA III do hereby accept the appointment designated above as:

(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date:

6/14/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X 