

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2021 MAY -3 PM 12: 36

PALM BEACH COUNTY, FL.

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)
Sylvia L Sharps

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

PO Box 2184

West Palm Beach, FL 33402-2184

4. Telephone
(5 6 1) 876-5553

5. E-mail address
sylvia.sharps@yahoo.com

6. Office sought (include district, circuit, group number)
Palm Beach County Commission, District 6

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 Democratic _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer
Sylvia L Sharps

11. Mailing Address
194A Sparrow Dr

12. Telephone
(5 6 1) 876-5553

13. City
Royal Palm Beach

14. County
Palm Beach

15. State
FL

16. Zip Code
33411

17. E-mail address
sylvia.sharps@yahoo.com

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

19. Name of Bank
Bank of America

20. Address
11601 Okeechobee Blvd

21. City
Royal Palm Beach

22. County
Palm Beach

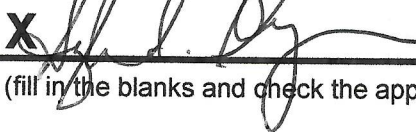
23. State
Florida

24. Zip Code
33411

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
5/3/21

26. Signature of Candidate



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

Sylvia L Sharps

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

designated above as: Campaign Treasurer Deputy Treasurer.

5/3/21

Date


Signature of Campaign Treasurer or Deputy Treasurer