

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2020 JUN 16 AM 10:03

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)

David, Irving, Shiner

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

8897 Sydney Harbor Circle
Delray Beach, FL 33446

4. Telephone

(561) 777-7700

5. E-mail address

David@VoteDavidShiner.com

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

Palm Beach County Commission, District 5

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 ☒ Republican Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

David Shiner

11. Mailing Address

8897 Sydney Harbor Circle

12. Telephone

(561) 777-7700

13. City

Delray Beach

14. County

Palm Beach

15. State

Florida

16. Zip Code

33446

17. E-mail address

David@VoteDavidShiner.com

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

19. Name of Bank

City National

20. Address

641 South Federal Highway

21. City

Boca Raton

22. County

Palm Beach

23. State

Florida

24. Zip Code

33432

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

6/16/20

26. Signature of Candidate



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

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

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

6/16/20

Date



Signature of Campaign Treasurer or Deputy Treasurer