

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2019 SEP 24 PM 12:20

BRIGIDE CURLEY  
SUPERVISOR OF ELECTIONS  
LAND O' LAKES, FLORIDA

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)

Adrienne Gabrielle Wilson

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

7211 Peregrina Loop  
Wesley Chapel, FL 33545

4. Telephone

(813 ) 205-4723

5. E-mail address

dr.adriannewilson@gmail.com

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

School board member, 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     \_\_\_\_\_ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Adrienne Wilson

11. Mailing Address

7211 Peregrina Loop

12. Telephone

( 813 ) 205-4723

13. City

Wesley Chapel

14. County

Pasco

15. State

FL

16. Zip Code

33545

17. E-mail address

dr.adriannewilson@gmail.com

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

19. Name of Bank

Suncoast Federal Credit Union

20. Address

P.O. Box 11904

21. City

Tampa

22. County

Hillsborough

23. State

Florida

24. Zip Code

33680

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

9/24/2019

26. Signature of Candidate

X *Adrienne Wilson*

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

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

designated above as:  Campaign Treasurer     Deputy Treasurer.

9/24/2019  
Date

X *Adrienne Wilson*  
Signature of Campaign Treasurer or Deputy Treasurer