

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2020 JAN -6 PM 10:09

BRIAN M. CURLEY  
SUPERVISOR OF ELECTIONS  
DADE COUNTY 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)**

Nikki Alvarez-Sowles

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

PO Box 1045  
Land O Lakes, FL 34639

**4. Telephone**

(813 ) 388-5009

**5. E-mail address**

clerknikki@gmail.com

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

Pasco Clerk of Circuit Court & County Comptroller

**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**

Sherri Stanaland-Holland

**11. Mailing Address**

PO Box 1521

**12. Telephone**

( 352 ) 521-3437

**13. City**  
Dade City

**14. County**  
Pasco

**15. State**  
FL

**16. Zip Code**  
33526

**17. E-mail address**  
sherri197@aol.com

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

**19. Name of Bank**  
Centennial Bank

**20. Address**  
14033 8th Street

**21. City**  
Dade City

**22. County**  
Pasco

**23. State**  
FL

**24. Zip Code**  
33525

**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**  
January 6, 2020

**26. Signature of Candidate**

X 

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

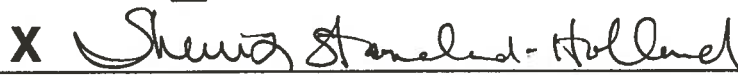
I, Sherri Stanaland-Holland

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

designated above as:       Campaign Treasurer       Deputy Treasurer.

January 6, 2020

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer