

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

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

(PLEASE PRINT OR TYPE)

received  
2-13-20 11:12 AM

**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)

JAMES EDWARD HALLETT

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

P O BOX 2350  
ST LEO FL 33574

**4. Telephone**

(352) 455-4275

**5. E-mail address**

bu.james@pointheo.edu

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

ST LEO COMMISSIONER - SEAT # 3

**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**

JAMES E. HALLETT

**11. Mailing Address**

P O Box 2350

**12. Telephone**

(352) 455-4275

**13. City**

ST LEO

**14. County**

PASCO

**15. State**

FL

**16. Zip Code**

33574

**17. E-mail address**

bu.james@pointheo.edu

**18. I have designated the following bank as my**

Primary Depository     Secondary Depository

**19. Name of Bank**

WELLS FARGO

**20. Address**

14210 7TH ST

**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**

2/13/2020

**26. Signature of Candidate**

X James Edward Hallett

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

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

designated above as:  Campaign Treasurer     Deputy Treasurer.

2/13/2020

Date

X James Hallett

Signature of Campaign Treasurer or Deputy Treasurer