

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

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

(PLEASE PRINT OR TYPE)

**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

**RECEIVED**

**20 JUN 10 PM 1:55**

**BRIANE CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA**

**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)**

*Shawn Eugene Foster*

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

*5957 Riviera Lane  
New Port Richey, FL  
34655*

**4. Telephone**

*(727) 808-4131*

**5. E-mail address**

*shawnfoster112@gmail.com*

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

*Republican - State Committeeman*

**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**

*Teresa Foster*

**11. Mailing Address**

*5957 Riviera Lane  
New Port*

**12. Telephone**

*(727) 808-4131*

**13. City**

*New Port Richey*

**14. County**

*Pasco*

**15. State**

*FL*

**16. Zip Code**

*34655*

**17. E-mail address**

*shawnfoster112@gmail.com*

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

**19. Name of Bank**

*Bank of America*

**20. Address**

*1752 Seven Springs Blvd*

**21. City**

*New Port Richey*

**22. County**

*Pasco*

**23. State**

*FL*

**24. Zip Code**

*34655*

**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**

*6/10/2020*

**26. Signature of Candidate**

*X* 

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

I, *Teresa Foster*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*06/10/20*  
Date

*X*   
Signature of Campaign Treasurer or Deputy Treasurer