

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

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

(PLEASE PRINT OR TYPE)

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SUPERVISOR OF ELECTIONS
ELECTION SERVICE CENTER

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)

Maryellen Crowder

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

3417 Tanglewood Trail

4. Telephone

(727) 698-3010

5. E-mail address

VOTE.MARYELLEN.CROWDER@GMAIL.COM

Palm Harbor, FL 34685

6. Office sought (include district, circuit, group number) 9th Dist. Cent. If a candidate for a nonpartisan office, check if applicable:

EAST LAKE TARPON Special Fire Control District SEAT 3

☐ 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

Maryellen Crowder

11. Mailing Address

3417 Tanglewood Trail

12. Telephone

(727) 698-3010

13. City

Palm Harbor

14. County

Pinellas

15. State

FL

16. Zip Code

34685

17. E-mail address

VOTE.MARYELLEN.CROWDER@GMAIL.COM

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

19. Name of Bank

SunTrust

20. Address

36105 E. Lake Rd

21. City

Palm Harbor

22. County

Pinellas

23. State

FL

24. Zip Code

34685

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

6-9-2020

26. Signature of Candidate

X Maryellen Crowder

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

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

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

6-9-2020

Date

X

Signature of Campaign Treasurer or Deputy Treasurer