

**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

2020 MAY -5 PM 5:06

SUPERVISOR OF ELECTIONS
ELECTION SERVICE CENTER

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)

Dan Helm

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

8851 US Highway 19 #2322,
Pinellas Park, FL, 33782

4. Telephone

(727) 351 - 3429

5. E-mail address

VoteDanHelm@gmail.com

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

Supervisor of Elections, Pinellas County

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 Democratic Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Samuel Slater

11. Mailing Address

1518 Carillon Park Drive

12. Telephone

(516) 650-3129

13. City

Ovideo

14. County

Seminole

15. State

FL

16. Zip Code

32765

17. E-mail address

sslater765@gmail.com

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

19. Name of Bank

B B & T

20. Address

3000 54th Ave. S.

21. City

St. Petersburg

22. County

Pinellas

23. State

FL

24. Zip Code

33712

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

5/4/20

26. Signature of Candidate

Daniel Helm

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

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

designated above as: Campaign Treasurer Deputy Treasurer.

5/4/20

Date

Samuel Slater

Signature of Campaign Treasurer or Deputy Treasurer