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 22 PH 1345

SUPERVISOR OF ELECTIONS ELECTION SERVICE CENTER

OFFICE USE ONLY

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1. CHECK APPROPRIATE Initial Filing of Form		S): -filing to Change	: 🔲 1	Freasure	r/Deputy	X Deposito	ory	Office		Party			
2. Name of Candidate (in	3. A	3. Address (include post office box or street, city, state, zip											
Sharon Denise Jackson					e) `								
4. Telephone	257	2570 Gomaz Way South											
(727) 647-6112	727) 647-6112 drjackson130@gmail.com						St. Petersburg, FL 33712						
6. Office sought (include of		7. If a candidate for a <u>nonpartisan</u> office, check if											
0.15					applicable: My intent is to run as a Write-In candidate.								
School Board Member													
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 Sharon Denise Jackson													
11. Mailing Address 12. Telephone													
2570 Gomaz Way South (727) 647-6112													
13. City	14. County 15. State				16. Zip Code 17. E-mail address								
St. Petersburg Pinellas FL					33712 drjackson130@gmail.com								
18. I have designated the following bank as my Primary Depository Secondary Depository													
l					20. Address								
Bank OZK 1					58. Beach Drive NE								
21. City		22. County			23. State			24. Zip C	ode				
St. Petersburg		Pinellas			FL			33701					
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				26. Sig	nature of Gar	religate	10.	. /					
5/22/20					X Signature organismoste Carlos								
27 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
I, Sharon Denise Jackson					, do hereby accept the appointment								
(Please Print or Type Name)													
designated above as: Campaign Treasurer Deputy Treasurer.													
5/22/20 X Dank Jakson													
Date	Signatu	re of Campai	gn T easure	r or Depu	ity Treasure	er							