

**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)

Tom Topping

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

2980 Haines Bayshore Road #160  
Clearwater, FL 33760

4. Telephone

(727 ) 641-8028

5. E-mail address

tom@trainingperfected.com

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

School Board District 1 - At Large

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

Tom Topping

11. Mailing Address

2980 Haines Bayshore Road #160

12. Telephone

( 727 ) 641-8028

13. City

Clearwater

14. County

Pinellas

15. State

FL

16. Zip Code

33760

17. E-mail address

tom@trainingperfected.com

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

19. Name of Bank

Achieva Credit Union

20. Address

2201 Drew Street

21. City

Clearwater

22. County

Pinellas

23. State

FL

24. Zip Code

33765

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

5/22/2020

26. Signature of Candidate

X 

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

I, Tom Topping, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

5/22/2020

Date

X

  
Signature of Campaign Treasurer or Deputy Treasurer