

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

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2020 JUN -4 AM 9:50
SUPERVISOR OF ELECTIONS
ELECTION SERVICE CENTER

(PLEASE PRINT OR TYPE)

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)

Eliseo SANTANA

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

*1400 BYRAM DR
CLEARWATER, FL
33755*

4. Telephone

(727) 366-7106

5. E-mail address

esantana33773@gmail.com

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

Pinellas County Sheriff

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

Eliseo SANTANA

11. Mailing Address

1400 BYRAM DR

12. Telephone

(727) 366-7106

13. City

Clearwater

14. County

Pinellas

15. State

FL

16. Zip Code

33755

17. E-mail address

Elect.SANTANA@gmail.com

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

19. Name of Bank

Wells Fargo

20. Address

639 S FT. HARRISON AVE

21. City

Clearwater

22. County

Pinellas

23. State

FL

24. Zip Code

33756

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

6/4/20

26. Signature of Candidate

X

[Signature]

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

I, *Eliseo SANTANA*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/4/20
Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer