

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)

Joseph Saportas

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

2464 Australia Way E #40  
Clearwater, FL 33763

4. Telephone

(727 ) 4923799

5. E-mail address

jsaportas@gmail.com

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

Tax Collector

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

Joseph Saportas

11. Mailing Address

13799 Park Blvd #309

12. Telephone

( 727 ) 4923799

13. City

Seminole

14. County

Pinellas

15. State

FL

16. Zip Code

33776

17. E-mail address

jsaportas@gmail.com

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

19. Name of Bank

Fifth Third Bank

20. Address

18395 Gulf Blvd

21. City

Indian Shores

22. County

Pinellas

23. State

FL

24. Zip Code

33785

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

6/5/2020

26. Signature of Candidate

X

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

I, Joseph Saportas, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

6/5/2020  
Date

X

Signature of Campaign Treasurer or Deputy Treasurer