

**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)

Brad Scott DeCorte

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

2657 Ridge Lane
Palm Harbor, FL 34684

4. Telephone

(727) 599-9034

5. E-mail address

electbraddecorte@gmail.com

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

Pinellas County School Board - District 2 - 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

Brad Scott Decorte

11. Mailing Address

30725 Hwy. 19 N. #209

12. Telephone

(727) 599-9034

13. City

Palm Harbor

14. County

Pinellas

15. State

FL

16. Zip Code

34684

17. E-mail address

electbraddecorte@gmail.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

Suncoast Federal Credit Union

20. Address

26232 US Highway 19 N.

21. City

Palm Harbor

22. County

Pinellas

23. State

FL

24. Zip Code

34684

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

7/13/2021

26. Signature of Candidate

X Brad Scott DeCorte

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

I, Brad Scott DeCorte, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

7/13/2021

Date

X Brad Scott DeCorte

Signature of Campaign Treasurer or Deputy Treasurer