

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
ST. PETERSBURG

NOTE: This form must be on file with the filing 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):
(Please Print or Type Name)

David Scott Leatherwood

3. Address (include PO Box or Street, City, State, Zip Code):

5235 4th Ave So
St Petersburg, FL 33707

4. Telephone:

(813) 385-8583

5. Candidate's Voter Registration #:

114387931

(not required for qualifying purposes)

6. Email Address:

David@leatherwoodforpinellas.com

7. Office Sought (include district, circuit, group, or seat #):

County Commission, District 3

8. If a candidate for a nonpartisan office, check the box
if applicable:

☐ I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☒ Republican Party candidate.

10. I have appointed the following person to act as my:

☒ Campaign Treasurer

☐ Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

David Scott Leatherwood

12. Telephone:

(813) 385-8583

13. Email Address:

David@leatherwoodforpinellas.com

14. Mailing Address:

5235 4th Ave So

15. City:

St Petersburg

16. State:

FL

17. Zip Code:

33707

18. I have designated the following bank as my (check appropriate box): ☐ Primary Depository ☐ Secondary Depository

19. Name of Bank:

Seacoast Bank

20. Address:

1200 4th St Na

21. City:

St Petersburg

22. County:

Pinellas

23. State:

FL

24. Zip Code:

33701

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE
CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

5/6/24

26. Signature of Candidate:

X

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

I, David Scott Leatherwood do hereby accept the appointment designated above as:
(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date:

5/6/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X