

**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 May

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

811 Anchorage Lane  
Palm Harbor, Fl. 34685

**4. Telephone**

(239 ) 850-5715

**5. E-mail address**

elfr300@hotmail.com

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

East Lake Tarpon Special Fire Control District  
Seat 4

**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     <sup>T.M.</sup> 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 May

**11. Mailing Address**

811 Anchorage Lane

**12. Telephone**

(239) 850-5715

**13. City**

Palm Harbor

**14. County**

Pinellas

**15. State**

Fla.

**16. Zip Code**

34685

**17. E-mail address**

elfr300@hotmail.com

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

**19. Name of Bank**

SUNTRUST

**20. Address**

3705 E BAY DR.

**21. City**

LARGO

**22. County**

PINELLAS

**23. State**

FL

**24. Zip Code**

33771

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**

06/21/18

**26. Signature of Candidate**

T Thomas May

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

I, T Thomas MAY, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

06/21/18

Date

T Thomas May

Signature of Campaign Treasurer or Deputy Treasurer