

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

RECEIVED

2020 JUN -2 AM 9:25

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)

Eileen M. Long

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

2019 Southpointe Dr
Dunedin, FL 34698

4. Telephone

(727) 953
2977

5. E-mail address

EileenLong2020@gmail.com

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

Pinellas County School Board District 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 ☐ 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

Eileen M. Long

11. Mailing Address

2019 Southpointe Pr.

12. Telephone

(727) 953-2977

13. City

Dunedin

14. County

~~Pinellas~~

15. State

FL

16. Zip Code

34698

17. E-mail address

EileenLong2020@gmail.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

Achieva CU

20. Address

2019 Southpointe Pr.

21. City

Dunedin

22. County

Pinellas

23. State

FL

24. Zip Code

34698

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

6-2-2020

26. Signature of Candidate

X Eileen M Long

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

I, Eileen M. Long, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer ☒ Deputy Treasurer.

6-2-2020

Date

X Eileen M Long

Signature of Campaign Treasurer or Deputy Treasurer