

**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)

Joanne Lentino

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

7010 Boca Ciega Drive
St. Pete Beach, Florida 33706

4. Telephone

(877) 871-0971

5. E-mail address

joanne899@msn.com

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

School Board District 1

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

Joanne Lentino

11. Mailing Address

7010 Boca Ciega Drive

12. Telephone

(727) 871-0971

13. City

St. Pete Beach

14. County

Pinellas

15. State

FL

16. Zip Code

33706

17. E-mail address

joanne899@msn.com

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

19. Name of Bank

Bank of America

20. Address

6599 Ulmerton Road

21. City

Largo

22. County

Pinellas

23. State

Florida

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

10/9/19

26. Signature of Candidate

X Joanne Lentino

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

I, Joanne Lentino, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

10/9/19
Date

X Joanne Lentino
Signature of Campaign Treasurer or Deputy Treasurer