APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

SUPERVISOR DE LUCCIONNE SARASOTA : TRATY ELDIQUA REFERENCE

2022 MAY 13 PM 3: 42

REG DATE_____

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	e: 🔲 Tre	easurer/[Deputy [Depository	, <u> </u>	Office Party	
2. Name of Candidate (in this order: First, Middle, Last)					e post office b	ox or s	street, city, state, zip	
Clayton W Taylor			code) 606 S	S Casey K	ev Road			
4. Telephone	5. E-mail address			Nokomis, FL 34275				
(301)367-7528	threetays@icloud	l.com						
6. Office sought (include of	district, circuit, group nun	nber)		1		onpar	tisan office, check if	
Charter Review Board District 4				applicable: My intent is to run as a Write-In candidate.				
	4 year ter							
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a								
☐ Write-In ☐ No Party Affiliation ☑ Republican Party candidate							rty candidate.	
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer								
10. Name of Treasurer or Deputy Treasurer Clayton W Taylor								
11. Mailing Address						l	elephone	
606 S Casey Ke		1	1.0	(301) 367-7528				
13. City Nokomis	14. County Sarasota	15. State	I	6. Zip Code 17. E-mail address 4275 threetays@icloud.com				
18. I have designated the following bank as my Primary Depository Secondary Depository								
· · · · · · · · · · · · · · · · · · ·				20. Address 140 Tamiami Trail N.				
21. City				23. State			24. Zip Code	
Nokomis	Sarasota			FL			34275	
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	ature of Cano	didate	0					
5/11/2022			X U	250 l	V. On	1	_	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)								
I, Clay ton W. Taylor, do hereby accept the appointment (Please Print or Type Name)								
designated above as:								
5/11/2	027_	X (Oli, Ti	tw.	Santon			
Date	signature	pature of Campaign Treasurer or Deputy Treasurer						