

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS  
SARASOTA COUNTY FLORIDA

2022 JUN -3 PM 4:10

FILED FOR RECORD  
SARASOTA COUNTY

**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)**

Alexandra Cole

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

4029 Bee Ridge Road  
Suite 5104  
Sarasota, FL 34233

**4. Telephone**

(941) 780 3447

**5. E-mail address**

SRQ.ALEXANDRA.COLE@gmail.com

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

Charter Review 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     Republican Party candidate.

**9. I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Alexandra Cole

**11. Mailing Address**

4029 Bee Ridge Road Suite 5104

**12. Telephone**

(941) 780 3447

**13. City**

Sarasota

**14. County**

Sarasota

**15. State**

FL

**16. Zip Code**

34233

**17. E-mail address**

SRQ.ALEXANDRA.COLE@gmail.com

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

**19. Name of Bank**

TRUIST

**20. Address**

5900 Katie Lane

**21. City**

Sarasota

**22. County**

Sarasota

**23. State**

Florida

**24. Zip Code**

34232

**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**

3 JUN 22

**26. Signature of Candidate**

X Alexandra Cole

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

I, Alexandra Cole, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer.     Deputy Treasurer.

3 JUN 22  
Date

X Alexandra Cole  
Signature of Campaign Treasurer or Deputy Treasurer