

**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

2023 JAN -5 PM 1:34

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)

RAY PILON

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

P.O. Box 49362
Sarasota FL 34230

4. Telephone

(941) 993-4213

5. E-mail address

rpilon13@verizon.net

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

Sarasota County Commission
DIST. 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

Kathleen PILON

11. Mailing Address

P.O. Box 49362
Sarasota FL

12. Telephone

(941) 926-8160

13. City

SARASOTA

14. County

SARASOTA

15. State

FL

16. Zip Code

34230

17. E-mail address

rpilon13@verizon.net

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

19. Name of Bank

CADENCE BANK

20. Address

25 S. LINKS AV

21. City

SARASOTA

22. County

SARASOTA

23. State

FL

24. Zip Code

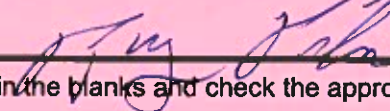
34230

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

1-5-2023

26. Signature of Candidate

X 

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

I, Kathleen Pilon, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

1-5-2023
Date

X

Kathleen Pilon
Signature of Campaign Treasurer or Deputy Treasurer