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

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying



officer before opening the campaign account.									OFFICI	USE	ONLY	
1. CHECK APPROPRIATE Initial Filing of Form	•	S): -filing to Change	: 🔲 :	Treas	surer/	Deputy [Deposit	ory	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)						Address (include post office box or street, city, state, zip code)						
Richard R. Del Toro, Jr.												
4. Telephone	5. E-mail address				2255 SE Veteran's Memorial Parkway P.O. Box 9132							
(772) 370-7782	deltoroforsheriff@gmail.com				Port St. Lucie, FL 34985							
6. Office sought (include district, circuit, group number)						7. If a candidate for a <u>nonpartisan</u> office, check if						
Sheriff of St. Lucie County					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 Jay McBee												
11. Mailing Address				12. Tele	phone							
591 SE Port St. Lucie I	(772) 878-1952											
13. City	14. County 15		15. St	State		S. Zip Code 17. E-mail address						
Port St. Lucie	St. Lucie FL				34952 jmcbee@dmhbcpa.com							
18. I have designated the following bank as my					Primary Depository Secondary Depository							
19. Name of Bank					0. Address							
Seacoast Bank 9					698 S US Hwy 1							
21. City		22. County		•		23. State			24. Zip Co	de		
Port St. Lucie		St. Lucie				FL			34952			
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 26.						S. Signature of Candidate						
. 11-18-20 X					Kichay I Wil For							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
ı,Jay McBee					, do hereby accept the appointment							
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer												
11-18-20 X tay MBel												
Date Si					gnature of Campaign Treasurer or Deputy Treasurer							