

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

FEB 26 2024

ST. JOHNS COUNTY

NOTE: This form must be on file with the filing 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):
(Please Print or Type Name)

Brandon Patty

3. Address (include PO Box or Street, City, State, Zip Code):

3501 N Ponce De Leon Blvd
Suite B #125
St. Augustine, FL 32084

4. Telephone:

(904) 599-8688

5. Candidate's Voter Registration #:

105140191

(not required for qualifying purposes)

6. Email Address:

brandon@brandonpatty.com

7. Office Sought (include district, circuit, group, or seat #):

St. Johns County Clerk of the Circuit Court and Comptroller

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. Republican Party candidate.

10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Stephanie Zottoli

12. Telephone:

(850) 877-1099

13. Email Address:

szottoli@ccrcpa.com

14. Mailing Address:

2640-A Mitcham Drive

15. City:

Tallahassee

16. State:

FL

17. Zip Code:

32308

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

Hancock Whitney Bank

20. Address:

101 N Monroe Street, Suite 150

21. City:

Tallahassee

22. County:

Leon

23. State:

FL

24. Zip Code:

32301

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

2-26-24

26. Signature of Candidate:

X 

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

I, Stephanie Zottoli do hereby accept the appointment designated above as:

(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date:

2/23/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X 