

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

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

(PLEASE PRINT OR TYPE)

JUL 3 15 PM 2:58

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)

*Lisa Lewis*

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

*860 Carter Rd.  
DeLand, FL 32724*

4. Telephone

*(386) 804-0695*

5. E-mail address

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

*Supervisor of Elections*

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     \_\_\_\_\_ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

*Lisa Lewis*

11. Mailing Address

*860 Carter Rd*

12. Telephone

*(386) 804-0695*

13. City

*DeLand*

14. County

*Volusia*

15. State

*FL*

16. Zip Code

*32724*

17. E-mail address

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

19. Name of Bank

*Mainstreet Community Bank*

20. Address

*204 S. Woodland Blvd*

21. City

*DeLand*

22. County

*Volusia*

23. State

*FL*

24. Zip Code

*32720*

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

*7-3-19*

26. Signature of Candidate

**X** *Lisa Lewis*

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

I, *Lisa Lewis*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*7-3-19*

Date

**X** *Lisa Lewis*

Signature of Campaign Treasurer or Deputy Treasurer