

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(2) and 106.021(1), F.S.)



CHECK APPROPRIATE BOX:

Initial Filing for: Primary Treasurer Deputy Treasurer

Re-filing to Change: Primary Treasurer Deputy Treasurer Primary/Secondary Depository

OFFICE USE ONLY

1. Committee CityPAC		2. Telephone (310) 210-9646	
3. Name of Treasurer or Deputy Treasurer Shirl G. Gauthier		4. Email (optional) go.tee.ay@gmail.com	
5. Telephone (optional) (443) 510-1776			
6. Mailing Address 111 S Pineapple Ave, #1102, Sarasota FL 34236			
7. Street Address 111 S Pineapple Ave. #1102, Sarasota FL 34236			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank BMO Bank		10. Street Address 52 S Lemon Ave	
11. City Sarasota		12. State FL	13. Zip Code 34236
14. Signature of Chairman X <i>Donna Perry Moffitt</i>		15. Name of Chairman (Print or Type) Donna Perry Moffitt	

Campaign Treasurer's Acceptance of Appointment

I, Shirl G. Gauthier, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for CityPAC
(Committee)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

March 24, 2023
Date

X *Shirl G. Gauthier*
Signature of Campaign Treasurer or Deputy Treasurer

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AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(2) and 106.021(1), F.S.)



CHECK APPROPRIATE BOX:

Initial Filing for: Primary Treasurer Deputy Treasurer

Re-filing to Change: Primary Treasurer Deputy Treasurer Primary/Secondary Depository

OFFICE USE ONLY

1. Committee CityPAC		2. Telephone (310) 210-9646	
3. Name of Treasurer or Deputy Treasurer Jim Lampl		4. Email (optional) jimlampl@msn.com	
5. Telephone (optional) (443) 510-1776			
6. Mailing Address 1301 Main St, #501, Sarasota FL 34236			
7. Street Address 1301 Main St, #501, Sarasota FL 34236			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank		10. Street Address	
11. City		12. State	13. Zip Code

14. Signature of Chairman X <i>Donna Perry Moffitt</i>	15. Name of Chairman (Print or Type) Donna Perry Moffitt
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Campaign Treasurer's Acceptance of Appointment

I, Jim Lampl, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for CityPAC
(Committee)

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

March 24, 2023

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)



1. Full Name of Committee

CityPAC

Telephone

310-210-9646

Mailing Address (include city, state and zip code)

PO Box 48923
Sarasota, FL 34236

Street Address (include city, state and zip code)

988 Blvd of the Arts, #912
Sarasota, FL 34236

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A		

3. Area, Scope and Jurisdiction of the Committee

Sarasota City

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

To advance the public interest in a more livable Sarasota

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Full Name	Mailing Address	Committee Title or Position
Shirl Gauthier	111 S Pineapple Ave Unit 1102 Sarasota, FL 34236	Treasurer

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)

Full Name	Mailing Address	Committee Title or Position
Donna Moffitt	988 Blvd of the Arts #912 Sarasota, FL 34236	Chair

7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)

Full Name	Mailing Address	Office Sought	Party
TBD			

8. List Any Issues this Committee is Supporting: Focused on issues of importance to residents of Sarasota
List Any Issues this Committee is Opposing:

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party
 No

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?
 Donated to charity TBD

11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds

Name of Bank or Depository & Account Number	Mailing Address
BMO Bank	52 S Lemon Ave Sarasota, FL 34236

12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
N/A			

STATE OF Florida Sarasota COUNTY

I, Donna Moffitt, certify that the information in this Statement of Organization is complete, true and correct.

X *Donna Perry Moffitt*
 Signature of Chairman of Political Committee

3/23/2023
 Date