

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

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

(PLEASE PRINT OR TYPE)

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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)

*Carole Jean Jordan*

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

*1855-34 AVENUE  
VERO BEACH FL 32960*

**4. Telephone:**

*(772) 538 7477*

**5. Candidate's Voter Registration #:**

(not required for qualifying purposes)

**6. Email Address:**

*jordanwj2@AOL.COM*

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

*Tax Collector, I.R.C.*

**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:**

*Pam Richardson*

**12. Telephone:**

*(772) 713-6752*

**13. Email Address:**

*PAMINDERO@bellsouth.net*

**14. Mailing Address:**

*1390 FORTROSE DR.*

**15. City:**

*VERO BEACH*

**16. State:**

*FL*

**17. Zip Code:**

*32966*

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

**19. Name of Bank:**

*MARINE BANK*

**20. Address:**

*1450 US 1*

**21. City:**

*VERO BEACH*

**22. County:**

*I.R.*

**23. State:**

*FL*

**24. Zip Code:**

*32960*

**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:**

*January 4, 2024*

**26. Signature of Candidate:**

*X Carole Jean Jordan*

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

I, *Pam Richardson*  
(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

**28. Date:**

*1-4-24*

**29. Signature of Campaign Treasurer or Deputy Treasurer**

*X Pam*