

RECEIVED SEP 07 2017

**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.

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)

Gail Angenette Johnson

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

1305 NW 6th St, Apt 3
Gainesville, FL 32601

4. Telephone

(352) 727 1473

5. E-mail address

gailangenettejohnson@gmail.com

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

Gainesville City Commission

At-Large
Seat 1

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

Nicholas Armfield

11. Mailing Address

530 NE 3rd St

12. Telephone

(352) 620-9389

13. City

Gainesville

14. County

Alachua

15. State

FL

16. Zip Code

32601

17. E-mail address

naarmfield@gmail.com

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

19. Name of Bank

Campus USA

20. Address

P.O. Box 147029

21. City

Gainesville

22. County

Alachua

23. State

Florida

24. Zip Code

32614

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

9/7/17

26. Signature of Candidate

X 

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

I, Nicholas Armfield, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

9-5-17

Date

X


Signature of Campaign Treasurer or Deputy Treasurer