APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

2019 MAR - 1 AM 11: 48

BROWARD COUNTY SUPERVISOR OF ELECTIONS

NOTE: This form must be on file with the qualifying officer before opening the campaign account

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) 3. Address (include post office box or street, city, state, zip code) Willie Jones P.O. Box 970133 5. E-mail address 4. Telephone Coconut Creek, Fl 33097 ₍786 ₎ 350-8033 WJ LARZ DO @ COMEAST. MET 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) applicable: **Broward County Sheriff** 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 Democratic Write-In No Party Affiliation Partv candidate. Deputy Treasurer 9. I have appointed the following person to act as my Campaign Treasurer 10. Name of Treasurer or Deputy Treasurer Anthony L. Jackson 12. Telephone 11. Mailing Address P.O. Box 970133 (786) 350-8033 14. County 15. State 16. Zip Code 17. E-mail address 13. City **Broward** FI 33097 Coconut Creek WILLAR 2DO a comerST. MET 18. I have designated the following bank as my **Primary Depository** Secondary Depository 20. Address 19. Name of Bank Bank of America 6650 N. State Road 7 22. County 23. State 24. Zip Code 21. City Coconut Creek 33073 Broward 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. 26. Signature of Candidate 25. Date 3-1-19 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. Anthony L Jackson , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer Deputy Treasurer. designated above as: 2/28/19 Signature of Campaign Treasurer or Deputy Treasurer Date

DS-DE 9 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.

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

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

(PLEASE PRINT OR TYPE)

2019 MAR - 1 AM 11: L8

DROWARD COUNTY SUPERVISOR OF ELECTIONS

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 1 Re-filing to Change: Treasurer/Deputy Depository Office Partv 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip Willie Jones code) P.O. Box 970133 4. Telephone 5. E-mail address Coconut Creek, Fl 33097 ₁786 ₃₅₀₋₈₀₃₃ WILAR 2000 COMCASI. HET 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: **Broward County Sheriff** 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 Democratic Write-In No Party Affiliation Partv candidate. 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer Larita Jones 11. Mailing Address 12. Telephone P.O. Box 970133 (786) 350-8033 13. City 14. County 15. State 16. Zip Code 17. E-mail address Coconut Creek Broward 33097 INJLAR RDOG COMCAST, NET 18. I have designated the following bank as my **Primary Depository** Secondary Depository 19. Name of Bank 20. Address 6650 N. State Road 7admin@williejones2020.c0m Bank of America 21. City 22. County 23. State 24. Zip Code Coconut Creek 33073 Broward 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 Signature of Candidate 3-1-19 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. Larita Jones , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer Deputy Treasurer. designated above as: 03-01-19

Rule 1S-2.0001, F.A.C.

Signature of Campaign Treasurer or Deputy Treasurer

Date

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

2019 MAR - 1 AM 11: 48

BROWARD SOUNTY SUPERVISOR OF ELECTIONS

OFFICE USE ONLY officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: [Treasurer/Deputy Depository Office Partv 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) code) Willie Jones P.O. Box 970133 5. E-mail address 4. Telephone Coconut Creek, FI 33097 ₁786 ₁ 350-8033 MJLAR2 DOG COMCAST, NET 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: Broward County Sheriff 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 Democratic No Party Affiliation Party candidate. Write-In Campaign Treasurer Deputy Treasurer 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer Sheila Fulton 12. Telephone 11. Mailing Address 786) 350-8033 P.O. Box 970133 16. Zip Code 17. E-mail address 14. County 15. State 13. City 33097 Broward FI Coconut Creek INJLAR 2DOG COMCASTINET Secondary Depository Primary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address 6650 N. State Road 7 Bank of America 24. Zip Code 22. County 23. State 21. City Coconut Creek **Broward** 33073 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. 26. Signature of Candidate 25. Date 3-1-19 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. Sheila Fulton , do hereby accept the appointment (Please Print or Type Name) Deputy Treasurer. Campaign Treasurer / designated above as: 2-26-19 Signature of Campaign Treasurer or Deputy Treasurer Date

Rule 1S-2.0001, F.A.C.

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

2019 MAR - 1 AM 11: 48

SUPERVISOR OF ELECTIONS

l,	Willie Jones ,
candidate for the office of _	Broward County Sheriff ;
have been provided access to read and understand the requirements of	
Chapter 106, Florida Statutes.	
x \lash	2-26-19
Signature of Cano	lidate Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).