

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**  
(Section 106.021(1), F.S.)  
(PLEASE PRINT OR TYPE)

RECEIVED

FEB 05 2024



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)  
  
Jason Carl Koon

**3. Address** (include PO Box or Street, City, State, Zip Code):  
  
768 N Man O War Dr  
Inverness, FL 34153

**4. Telephone:**  
  
(352) 302-1751

**5. Candidate's Voter Registration #:**  
102696551  
(not required for qualifying purposes)

**6. Email Address:**  
  
Vote4JKoon@gmail.com

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

**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:**  
  
Jeremy Applegate

**12. Telephone:**  
  
(352) 1732-0171

**13. Email Address:**  
  
jpa@dixcopa.com

**14. Mailing Address:**  
  
334 N.W. 3rd Ave

**15. City:**  
  
Ocala

**16. State:**  
  
FL

**17. Zip Code:**  
  
34475

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

**19. Name of Bank:**  
  
Branch Bank

**20. Address:**  
  
320 Hwy 41 S

**21. City:**  
  
Inverness

**22. County:**  
  
Citrus

**23. State:**  
  
FL

**24. Zip Code:**  
  
34450

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:**  
  
2-5-2024

**26. Signature of Candidate:**  
  
X

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate box)  
  
I, Jeremy Applegate do hereby accept the appointment designated above as:  
(Please Print or Type Name)  
  
 Campaign Treasurer.     Deputy Treasurer.

**28. Date:** 1/30/2024

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