

APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES  
(Section 106.021(1), F.S.)

Recvd 2020 JAN 15 PM 01:20

(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)  
**DARRYL RAMON DANIELS**

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

4. Telephone \_\_\_\_\_ 5. E-mail address \_\_\_\_\_

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

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     **REPUBLICAN** Party candidate.

9. I have appointed the following person to act as my  Campaign Treasurer     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer  
**DARRYL DANIELS**

11. Mailing Address **Protected** 12. Telephone \_\_\_\_\_

13. City \_\_\_\_\_ 14. County \_\_\_\_\_ 15. State \_\_\_\_\_ 16. Zip Code \_\_\_\_\_ 17. E-mail address \_\_\_\_\_

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

19. Name of Bank **VYSTAR CREDIT UNION** 20. Address **601 N. ORANGE AVE.**

21. City **GREEN COVE SPRINGS** 22. County **CLAY** 23. State **FL.** 24. Zip Code **32043**

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 **1-15-20** 26. Signature of Candidate **X [Signature]**

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  
 I, **DARRYL DANIELS**, do hereby accept the appointment  
 (Please Print or Type Name)  
 designated above as:  Campaign Treasurer     Deputy Treasurer.  
**1-15-20** **X [Signature]**  
 Date Signature of Campaign Treasurer or Deputy Treasurer