

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES


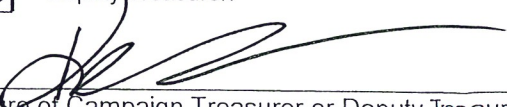
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

Recvd 2020FEB05PM03:23

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

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES): <input checked="" type="checkbox"/> Initial Filing of Form Re-filing to Change: <input type="checkbox"/> Treasurer/Deputy <input type="checkbox"/> Depository <input type="checkbox"/> Office <input type="checkbox"/> Party				
2. Name of Candidate (in this order: First, Middle, Last) <i>Kristen Burke</i>			3. Address (include post office box or street, city, state, zip code) <i>1812 CR 209B Green Cove Springs, FL 32043</i>	
4. Telephone <i>(904) 338-8207</i>		5. E-mail address <i>spine98dec@aol.com</i>		
6. Office sought (include district, circuit, group number) <i>District 5 County Commissioner</i>			7. If a candidate for a <u>nonpartisan</u> office, check if applicable: <input type="checkbox"/> My intent is to run as a Write-In candidate.	
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a <input type="checkbox"/> Write-In <input type="checkbox"/> No Party Affiliation <input checked="" type="checkbox"/> <i>Republican</i> Party candidate.				
9. I have appointed the following person to act as my <input type="checkbox"/> Campaign Treasurer <input checked="" type="checkbox"/> Deputy Treasurer				
10. Name of Treasurer or Deputy Treasurer <i>Kristen Burke</i>				
11. Mailing Address <i>1812 County Road 209B</i>			12. Telephone <i>(904) 338-8207</i>	
13. City <i>Green Cove Springs</i>	14. County <i>Clay</i>	15. State <i>FL</i>	16. Zip Code <i>32043</i>	17. E-mail address <i>spine98dec@aol.com</i>
18. I have designated the following bank as my <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository				
19. Name of Bank <i>WYSTAR CU</i>			20. Address <i>601 N. Orange Avenue</i>	
21. City <i>Green Cove Springs</i>	22. County <i>Clay</i>	23. State <i>FL</i>	24. Zip Code <i>32043</i>	
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 <i>2/5/20</i>		26. Signature of Candidate <i>X</i> 		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) I, <u><i>Kristen Burke</i></u> , do hereby accept the appointment (Please Print or Type Name) designated above as: <input type="checkbox"/> Campaign Treasurer <input checked="" type="checkbox"/> Deputy Treasurer. <u><i>2/5/20</i></u> <i>X</i>  Date Signature of Campaign Treasurer or Deputy Treasurer				