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

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

(PLEASE PRINT OR TYPE)

DS-DE 9 (Rev. 10/10)

Record 2021AUG02AH11:13

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY
1. ÇHECK 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
Tonua P. Baras	Fleming Island, FL 32003#178
Tonya P. Barge 4. Telephone 5. E-mail address	Fleming Island, FL 22002#178
904-701-7874, bargeforjudge@mail.com	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Clay	applicable:
County Court Judge, Group	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	
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	
Hector Murcia Bustos	
11. Mailing Address	12. Telephone
5000 US HWY 175, Ste 18	4 78 (904) 450 - 5081
13. City P14. County 15. State 16. Zip Code 17. E-mail address Fleming Island Clay FL/32003 Barge Campaign Treasurere gneit	
18. I have designated the following bank as my Primary Depository Secondary Depository	
	20. Address
1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	001 N. Drange Ave
21. City 22. County	23. State 24. Zip Code
Green Cove Spring Clay	FL 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	26. Signature of Candidate
Q2 Aug 21	XJ. P. Bareje
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
I, Hector Murcia B (Please Print or Type Name)	, do hereby accept the appointment
designated above as:	
8/2/21. X	Mh Mh Mh
Date Signature of Campaign Treasurer or Deputy Treasurer	
DS-DE 9 (Rev. 10/10)	Rule 1S-2.0001, F.A.C.