

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

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

(PLEASE PRINT OR TYPE)

Rec'd 2023MAY01PM03:00

**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)**

David S. Broskie

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

P O Box 156  
Green Cove Springs, FL 32043

**5. E-mail address**

**Protected**

Vote davidbroskie@gmail.com

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

Superintendent of Schools

**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**

David S. Broskie

**11. Mailing Address**

P O Box 156

**Protected**

**13. City**

Green Cove Springs

**14. County**

Clay

**15. State**

FL

**16. Zip Code**

32043

**17. E-mail address**

Vote davidbroskie@gmail.com

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

**19. Name of Bank**

Nystar Credit Union

**20. Address**

601 N. Orange Avenue

**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**

5/1/23

**26. Signature of Candidate**

David S. Broskie

**27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)**

I, David S. Broskie, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer.

Deputy Treasurer.

5/1/23

Date

David S. Broskie

Signature of Campaign Treasurer or Deputy Treasurer