

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

Recvd 2023SEP07PM01:12

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)

4. Telephone 5. E-mail address

(

Protected

6. Office sought (include district, circuit, group number)
CLAY COUNTY 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 _____ 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 12. Telephone

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Protected

te 16. Zip Code 17. E-mail address

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

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

21. City 22. County 23. State 24. Zip Code
GREEN COVE SPRINGS 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
9-7-23 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.

9-7-23 X [Signature]
Date Signature of Campaign Treasurer or Deputy Treasurer