APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

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

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OFFICE USE ONLY

opening the campaign account.						OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):						
☐ Initial Filing of Form ☐ Re-	/Deputy \Box	Depository	Offic	e 🛘 Party		
2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name)			3. Address (include PO Box or Street, City, State, Zip Code):			
(issues i mit of Type Name)			2304 Stonebridge dr			
Robert Patrick Alvero			2304 STonebridge dr Orange Park FL 32065			
4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address:						
(904) 568 3162 122 82/557 Vote Alvero@gmail.com						∽
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a <u>nonpartisan</u> office, check the box						
School Board District 2 if applicable:						
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a						
☐ Write-In Candidate. ☐ No	Party Affiliation Candid	date.	-			_ Party candidate.
10. I have appointed the following person to act as my: Campaign Treasurer						
11. Name of Treasurer or Deputy Treasurer: 12. Telephone: 13. Email Address:						
14. Mailing Address: (904) 654 1247 + Any . Xa(xa n & Co						
14. Mailing Address:				17. Zip Code:		
			1 Cove spri			31045
18. I have designated the following bank as my (check appropriate box): ☑ Primary Depository ☐ Secondary Depository						
19. Name of Bank: Wells Fargo 21. City: Ovange Pork ()		,	20. Address: 400 Blanding Blvd ounty: 23. State: 24. Zip Code:			
21. City:		22. Cou	nty:	23. Sta	ite:	24. Zip Code:
		Cla	4	1-	_	32073
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.						
25. Date: 02/21/24			26. Signature of Candidate:			
23. Date. 02/21/29		,	X	17		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)						
I,						
☐ Campaign Treasurer. ☐ Deputy Treasurer.						
28. Date: - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			29. Signature of Campaign Treasurer of Deputy Treasurer			
212124			X [//M	1 Mi	acr	YM .
DS-DE 9 (Eff. 10/23)	<u> </u>		0	P		Rule 15-2.001, F.A.C.