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

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1. CHECK APPROPRIATE BOX(ES):								
☐ Initial Filing of Form ☐ Re-filing to Change: Treasure			500000-00000-0	1000	pository		AN DESCRIPTION	
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):					
							500 E	
- 111-11-11-11-11-11-11-11-11-11-11-11-1			1949 APOPKa Drive, middleburg, FL,					
Elijah matthew mitchell			32068					
. Telephone: 5. Candidate's Voter Registrat				tion #: 6. Email Address:				
(904)327-9167	(not required for qualifying purposes) Votematthewn. + chall agmail. com						agmail. com	
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a nonpartisan office, check the box								
S(hoc) Board District 2 ☐ I intend to run as a Write-In Candidate.								
School Board District 2 I intend to run as a Write-In Candidate. 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 Candidate. ☐								
The second secon								
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer								
100 000				12. Telephone: 13. Email Address:				
El. Jan matthew mitchell (904) 327-9167 Votematthewm.tchill a Smail.a. 14. Mailing Address: 15. City: 16. State: 17. Zip Code:								
14. Mailing Address:			y:		16. St	ate:	17. Zip Code:	
1949 APOPKA DINE		m. ddleburg		FL		32068		
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository								
				20. Address:				
VYStar cresit union			unty: 23. State: 24. Zip Code: 320 43					
21. City: 2			22. County:		23. State:		24. Zip Code:	
The state of the s						- 12		
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.								
			26. Signature of Candidate:					
25. Date: 06/03/2024	<u> </u>		X	Z	m			
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
I, Eljah matthew m.tcher do hereby accept the appointment designated above as: (Please Print or Type Name)							nated above as:	
Campaign Treasurer.				☐ Deputy Treasurer.				
28. Date: 06/03/\$2024			29. Signature of Campaign Treasurer of Deputy Treasurer					
			XVM					
DS-DE 9 (Eff. 10/23) Rule 1S-2.001, F.A.C.							Rule 1S-2.001, F.A.C.	