

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

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

(PLEASE PRINT OR TYPE)

**RECEIVED**

JUN 08 2020

DUVAL COUNTY ELEC.

By BB

**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)

JOHN BRIAN TURNER

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

4871 GREENLAND HIDEAWAY DR, NORTH  
JACKSONVILLE, FL 32258

4. Telephone

(904) 880-2855

5. E-mail address

TURNER FOR SCHOOL BOARD  
@COMCAST.NET

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

SCHOOL BOARD DISTRICT 7

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

JOHN TURNER

11. Mailing Address

4871 GREENLAND HIDEAWAY DR, NORTH

12. Telephone

(904) 880-2855

13. City

JACKSONVILLE

14. County

DUVAL

15. State

FL

16. Zip Code

32258

17. E-mail address

TURNER FOR SCHOOL BOARD@COMCAST.NET

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

19. Name of Bank

VYSTAR CREDIT UNION

20. Address

10950 SAN JOSE BLVD

21. City

JACKSONVILLE

22. County

DUVAL

23. State

FL

24. Zip Code

32223

**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

JUNE 8, 2020

26. Signature of Candidate

X John Turner

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

I, JOHN TURNER, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

JUNE 8, 2020  
Date

X John Turner  
Signature of Campaign Treasurer or Deputy Treasurer