

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES
(Sections 106.011(2) and 106.021(1), F.S.)

RECEIVED

AUG 03 2020

DUVAL COUNTY ELEC
By [Signature]

CHECK APPROPRIATE BOX:

Initial Filing for: ☒ Primary Treasurer ☐ Deputy Treasurer

OFFICE USE ONLY

Re-filing to Change: ☐ Primary Treasurer ☐ Deputy Treasurer ☐ Primary/Secondary Depository

1. Committee <u>Save the School Names.org</u>		2. Telephone ()	
3. Name of Treasurer or Deputy Treasurer <u>NORMAN J. ABRAHAM</u>		4. Email (optional)	
5. Telephone (optional) <u>(904) 708-8453</u>			
6. Mailing Address <u>4530 St. Johns Avenue, Suite 15, Box 230 Jax. FL 32210</u>			
7. Street Address			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank <u>VYSTAR Credit Union</u>		10. Street Address <u>4420 WABASH AVENUE JACKSONVILLE, FL - 3</u>	
11. City <u>JACKSONVILLE,</u>		12. State <u>FL</u>	13. Zip Code <u>32210</u>
14. Signature of Chairman <u>X [Signature]</u>		15. Name of Chairman (Print or Type) <u>Robert Lawrence</u>	

Campaign Treasurer's Acceptance of Appointment

I, NORMAN J. ABRAHAM, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for SAVE the School NAMES.ORG
(Committee)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

7/31/20

Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer