## 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 qualifying

DS-DE 9 (Rev. 10/10)

## RECEIVED

OCT 2 3 2020

DUVAL COUNTY ELEC. By\_\_\_\_\_\_

Rule 1S-2.0001, F.A.C.

officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
Initial Filing of Form Re-filing to Change: Tre	easurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	Address (include post office box or street, city, state, zip
James C. Jacobs	code) 9439 sandose blod # 79
4. Telephone 5. E-mail address	Jacksonville F132257
(904)5347452 James CJambs Forcity council & gmail.com	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
City Council At-large Gray 3	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 ☐ ☐ ☐ ☐	nocvatic Party candidate.
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer	
James c. Jacobs	
11. Mailing Address	12. Telephone
9439 sandere blvd #79	(904)5347452
13. City 14. County 15. Stat	
Jacksonville Dyval Fl	32257 James C Jew bs for C. tyrounall gmalices
18. I have designated the following bank as my	Primary Depository Secondary Depository
19. Name of Bank  Jax Federal Credit union  20. Address  11406-2 sun Jose blad  21. 7in Soda	
21. City \ 22. County	23. State 24. Zip Code
21. City Jacksonyille Dural	F1 32257
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
10/23/2020	x () _ e. (_
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
Lames c. Jacobs	
(Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasurer Deputy Treasurer.	
11-23-2020 X /2 C/	
	Signature of Campaign-Treasurer or Deputy Treasurer