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

RECEIVED

APR 18 2022

DUVAL COUNTY ELEC. By____

officer before opening the campaign account. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: Treasurer/Deputy Depository Initial Filing of Form 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) P.O. Box 550506 4. Telephone JACKSONUIlle, F132255 6. Office sought (include district, circuit, group number) 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 No Party Affiliation Write-In Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** Name of Treasurer or Deputy Treasurer KAMONA S 11. Mailing Address 12. Telephone 16. Zip Code 17. E-mail address JACKSONVIlle 32257 K5 ROOD @ Comcast. Net Primary Depository 18. I have designated the following bank as my Secondary Depository 19. Name of Bank 20. Address ISTAR 21. City 22. County DUVAL 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 APRIL 16,2022 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. KAMONA S. KOOD (Please Print or Type Name) , do hereby accept the appointment Campaign Treasurer esignated above as: Deputy Treasurer ORIL 16,2022 X Signature of Campaign Tréasurér or Deputy Treasurer