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

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

(PLEASE PRINT OR TYPE)

## RECEIVED

DEC 2 9 2021

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

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											
Name of Candidate (in this order: First, Middle, Last)									ctate :		
					Address (include post office box or street, city, state, zip code)						
Morgan Starks Roberts					2533 River Road						
4. Telephone		il address		Jacksonville, FI 32207							
(904 ) 610-4226	starksn	nb@gmail.co	m								
6. Office sought (include of	7. If a candidate for a nonpartisan office, check if										
jacksonville City Council, District 5					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 Republican Party candidate.											
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer											
10. Name of Treasurer or Deputy Treasurer											
William S Jones											
11. Mailing Address							12. Tele	phone			
14260 West Newberry Rd NUM 343							( 352	256-95	79		
13. City	14. C	ounty	15. Sta	te 16. Zip Code 17. E-mail address							
Newberry	Alach	iua	FI	32	669						
18. I have designated the following bank as my											
19. Name of Bank	20. Address										
Bank of America				Bank of America Center, 100 North Tryon Street							
21. City		22. County			23. State			24. Zip Co	ode		
Charlotte		Mecklenburg	]		NC			28255			
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						
12-23-21					x y Rebetz						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
ı, William S. jones					, do hereby accept the appointment						
(Please Print or Type Name)											
designated above as:	X	Campaign 1	Treasure	r 🔲	Deputy Tre	easurer.	,				
12-23-		SAM	W								
Date				Signatur	e of Campai	gn Treasure	er or Depu	ity Treasure	er		