## 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 officer before opening the campaign account.

## **RECEIVED**

JUN 1 1 2021

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

**OFFICE USE ONLY** 

1. CHECK APPROPRIATE  Initial Filing of Form	BOX(ES): Re-filing to 0	Change:	Treasurer	/Deputy	Deposito	ry 🗌	] Office	☐ Party
Name of Candidate (in this order: First, Middle, Last)     Kimberly Daniels				3. Address (include post office box or street, city, state, zip code) 9452 Devonshire Blvd, Jacksonville, Florida 32208				
4. Telephone 5. E-mail address					•			~ ~ <b></b>
(904 ) 445-1234 danielsdistrict10@gmail.com								
6. Office sought (include district, circuit, group number) Jacksonville City Council, District 10				7. If a candidate for a <u>nonpartisan</u> 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 F	ocratic	tic Party candidate.						
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer								
10. Name of Treasurer or Deputy Treasurer Kimberly Daniels								
11. Mailing Address  12. Telephone								
9452 Devonshire Blvd (904 ) 445-1234								1
13. City 14. County		15. St	ľ	16. Zip Code 17. E-mail address				
Jacksonville Duval FL				32208 danielsdistrict10@gmail.com				
18. I have designated the following bank as my Primary Depository Secondary Depository								
				D. Address				
				005 Dunn Avenue				
21. City	, ,,,			23. State			24. Zip Code	
Jacksonville	Duval		·	Florida			32208	
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								
6/11/2021 <b>X</b>				1/1/Jan				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)								
I, Kimberly Daniels , do hereby accept the appointment								
(Please Print or Type Name)								
designated above as: Campaign Treasurer Deputy Treasurer.								
6/11/2021 X /// \								
Date Signature of Campaign Treasurer or Deputy Treasurer								