APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

IOTE: This form must be on file with the qualifyin

RECEIVED

SEP 0 6 2022

DUVAL COUNTY FLEC,

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY
1 CHECK APPROPRIATE BOX(ES):	
	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
BRIAN LAN MICKS	code)
BRIAN My MICKS 4. Telephone (678) 855/889 HICKS 2021 69 MAIL. COM	- PoBOX 12181 4 JAX4L32209
	1 JAX+LSCC
Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
(i+x council District	applicable: My intent is to run as a Write-In candidate.
Meito In Dark Affiliation	
Write-In No Party Affiliation	Party candidate.
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
Name of Treasurer or Deputy Treasurer	
11. Mailing Address	12. Telephone
1999 W/ 25th St	(386) 450 138/
13. City 14. County 15. Sta	1-01
Dacksonville DUVAL FL	- 32209 mybuez 2018 @ 1 Cloud.com
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank	20. Address
Wells targo	SITS Lenox Auc
21. City 22. County	23. State 24. Zip Code
Jacksonville Duval	FC 13000
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
09/06/2022	X Branmk
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
(Please Print or Type Name)	, do hereby accept the appointment
esignated above as: Campaign Treasurer	Deputy Treasurer.
09/06/2012 X Bo	odien Sperd
Date	Signature of Campaign Treasurer or Deputy Treasurer