

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

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

(PLEASE PRINT OR TYPE)

**RECEIVED**

MAR 09 2022

DUVAL COUNTY ELEC.  
By [Signature]

**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

**2. Name of Candidate (in this order: First, Middle, Last)**

Lindsey C. Brock III

**3. Address (include post office box or street, city, state, zip code)**

11042 Harbor Cay Ct.  
Jacksonville, FL 32225

**4. Telephone**

(904 ) 966-1144

**5. E-mail address**

lcbjax@gmail.com

**6. Office sought (include district, circuit, group number)**

Jacksonville City Council, District 2

**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**

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**

1722 NW 80th Blvd, Suite 90

**12. Telephone**

( 202 ) 239-1642

**13. City**

Gainesville

**14. County**

Alachua

**15. State**

FL

**16. Zip Code**

32606

**17. E-mail address**

**18. I have designated the following bank as my**  Primary Depository       Secondary Depository

**19. Name of Bank**

Bank of America

**20. Address**

Bank of America Center, 100 North Tryon Street

**21. City**

Charlotte

**22. County**

Mecklenburg

**23. State**

NC

**24. Zip Code**

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**

3/5/22

**26. Signature of Candidate**

X [Signature]

**27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)**

I, William S. Jones, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer       Deputy Treasurer.

03-08-22

Date

X

[Signature]  
Signature of Campaign Treasurer or Deputy Treasurer