

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

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

(PLEASE PRINT OR TYPE)

**RECEIVED**

DEC 28 2021

DUVAL COUNTY ELEC.  
By VK

**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)

JACK L MEEKS

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

1354 N LAURA STREET  
JACKSONVILLE FL 32206

**4. Telephone**

(904 ) 210-5742

**5. E-mail address**

jmeeks@jackmeekscpa.com

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

CITY COUNCIL AT LARGE GROUP 5

**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     \_\_\_\_\_ Party candidate.

**9. I have appointed the following person to act as my**     Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

KAREN M CONN

**11. Mailing Address**

1354 N. LAURA STREET

**12. Telephone**

( 904 ) 346-0046

**13. City**

JACKSONVILLE

**14. County**

DUVAL

**15. State**

FL

**16. Zip Code**

32206

**17. E-mail address**

kconn@jackmeekscpa.com

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

**19. Name of Bank**

COGENT BANK

**20. Address**

5011 GATE PARKWAY, BLD 100, STE 150

**21. City**

JACKSONVILLE

**22. County**

DUVAL

**23. State**

FL

**24. Zip Code**


32256

**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**

12/28/2021

**26. Signature of Candidate**



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

I, KAREN M CONN, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

12/28/2021  
Date



Signature of Campaign Treasurer or Deputy Treasurer