

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

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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)

Charlotte D. Joyce

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

1099 Victory Lake Drive
Jacksonville, FL 32221

4. Telephone

(904) 891-9813

5. E-mail address

charlottejoyce7@gmail.com

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

Duval County School Board, District 6

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

Patrick W. Joyce, Esq.

11. Mailing Address

14 East Bay Street

12. Telephone

(904) 357-3660

13. City

Jacksonville

14. County

Duval

15. State

FL

16. Zip Code

32202

17. E-mail address

pjoyce@milamhoward.com

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

19. Name of Bank

Vystar Credit Union

20. Address

76 South Laura Street

21. City

Jacksonville

22. County

Duval

23. State

Florida

24. Zip Code

32202

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

3-7-2022

26. Signature of Candidate

X

[Signature]

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

I, Patrick W. Joyce
(Please Print or Type Name) do hereby accept the appointment

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer

3-7-22
Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer