

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

JUL 13 2022

DUVAL COUNTY, FL  
By LS

**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)

Austin Glennon

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

3971 Cattail Pond Drive  
Jacksonville, FL 32224

**4. Telephone**

(904 ) 246-1512

**5. E-mail address**

drglennon@pathwellness.cor

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

Jacksonville City Council, District 3

**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**

( 352 ) 275-5004

**13. City**

Gainesville

**14. County**

Alachua

**15. State**

FL

**16. Zip Code**

32606

**17. E-mail address**

treasurer@electioneeringconsulting.com

**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**

7-13-22

**26. Signature of Candidate**

X

*[Handwritten 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

07-12-22

X

*[Handwritten Signature]*

Date

Signature of Campaign Treasurer or Deputy Treasurer