

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

AUG 31 2022

DUVAL COUNTY ELEC.

By BB

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)

Randy White

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

[REDACTED]

4. Telephone

[REDACTED]

5. E-mail address

[REDACTED]

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

Jacksonville City Council District 12

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

8-31-22

26. Signature of Candidate

X Randy White

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

08-29-22

X

[Signature]

Date

Signature of Campaign Treasurer or Deputy Treasurer