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

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

(PLEASE PRINT OR TYPE)

RECEIVED

DEC 16 2022

DUVAL COUNTY ELEC. By_____

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip code)
1) EGGIE GSFFNEY JR 4. Telephone 5. E-mail address	
	11636 Jerny Adamst Co 32218 Jox Fl
1 907) 274-4664 12991c 4seven@g mgil, kom	
	7. If a candidate for a <u>nonpartisan</u> office, check if applicable:
City District 7	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	
r Write-in No Party Affiliation	D-emo: Party candidate.
9. I have appointed the following person to act as my	
10. Name of Treasurer or Deputy Treasurer	
James M. Brake	12. Telephone
11. Mailing Address	
10887 Coval Shores of 13. City 14. County 15. St	dv #109 561 699.3232
13. City 14. County 15. State 16. Zip Code 17. E-mail address 16. Zip Code 17. E-mail address	
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank	20. Address
Ameris Bonk	1301 Riverplace BIVCI
21. City 22. County	23. State 24. Zip Code
Jax Dovol	41 3207
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	26. Signature of Candidate
12/16/2022	X Reggie alph
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
1, James Broke	, do hereby accept the appointment
(Please Print or Type Name)	
designated above as: Campaign Treasurer Deputy Treasurer.	
12/16/32 X	
Date	Signature of Campaign Treasurer or Deputy Treasurer