

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

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

(PLEASE PRINT OR TYPE)

**RECEIVED**

**JAN 12 2023**

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)

**Moné Holder**

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

9671 Lemon Grass Ln, Jacksonville, FL 32219

**4. Telephone**

( 305 ) 321-4573

**5. E-mail address**

mone.hoder@gmail.com

**6. Office sought** (include district, circuit, group number)  
City Council At-large Group 1

**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    ☒ Democrat Party candidate.

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

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

Moné Holder

**11. Mailing Address**

9671 Lemon Grass Ln

**12. Telephone**

( 305 ) 321-4573

**13. City**

Jacksonville

**14. County**

Duval

**15. State**

FL

**16. Zip Code**

32219

**17. E-mail address**

mone.holder@gmail.com

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

**19. Name of Bank**

Vystar Credit Union

**20. Address**

760 Riverside Avenue

**21. City**

Jacksonville

**22. County**

Duval

**23. State**

FL

**24. Zip Code**

32204

**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**

01/12/2023

**26. Signature of Candidate**

☒ [Signature]

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

I, Moné Holder, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer.

☐ Deputy Treasurer.

01/12/2023

Date

☒

[Signature]

Signature of Campaign Treasurer or Deputy Treasurer