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

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

RECEIVED

OCT 26 2023

DUVAL COUNTY ELEC. By BB

officer before opening the campaign account.									OFFIC	E 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) Hank Rogers					3. Address (include post office box or street, city, state, zip code) P.O. Box 43453					
4. Telephone	5. E-mail address				Jacksonville, Florida 32203					
(904)228-7722	hankor	ogers@icloud								
6. Office sought (include district, circuit, group number) Duval County School Board, District 5					7. If a candidate for a <u>nonpartisan</u> 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.										ndidate.
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer										
10. Name of Treasurer or Deputy Treasurer Audrey L. Stripling										
11. Mailing Address 6728 Champlain Road (904) 203-9497										-9497
13. City Jacksonville	14. County 15 Duval FL			The state of the s		Zip Code 17. E-mail address 208 agsthree@gmail.com				
18. I have designated the following bank as my										
					^{20.} Address 1601 N. Main Street					
21. City	22. County			23. State			24. Zip Code 32202			
Jacksonville Duval										
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.										
/ /					26. Signature of Candidate					
10/26/2083					XAR					
27. / Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
Audrey L. Stripling					, do hereby accept the appointment					
(Please Print or Type Name)										
designated above as:	\geq	Campaign Tre	easurer.		7	Deputy Tr	reasurer.	1		
Date X Signature of Campaign Treasure or Deputy Treasurer										rer