## 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 filing officer before opening the campaign account.



OFFICE USE ONLY

opening the campaign account.			OF	FICE USE ONLY			
1. CHECK APPROPRIATE BOX(ES):							
☐ Initial Filing of Form ■ Re	e-filing to Change:	☐ Treasur	rer/Deputy 🔳 D	epository [	Office	☐ Party	
2. Name of Candidate (in this order: First, Middle, Last):			3. Address (include PO Box or Street, City, State, Zip Code):				
(Please Print or Type Name) Brooke Brady							
Dioono Diady							
	<b>-</b>						
4. Telephone: 5. Candidate's Voter Reg			egistration #: 6. Email Address:				
(not required for qualifyin			es)				
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a nonpartisan office, check the box							
County Court Judge, Group 2 if applicable:  □ I intend to run as a Write-In Candidate.							
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a							
☐ Write-In Candidate. No	Party Affiliation Candid	date. [	]		P:	arty candidate.	
10. I have appointed the following person to act as my:   Campaign Treasurer  Deputy Treasurer							
11. Name of Treasurer or Dep	12. Telephone:		13.	13. Fmail Address:			
Brooke Brady							
14 Mailing Address	15. City	y:	16. State:	17.	. Zip Code:		
	,			;			
18. I have designated the following bank as my (check appropriate box): Primary Depository  Secondary Depository							
19. Name of Bank:	20. Address:						
Florida Capital Bank			10151 Deerwood Park Blvd				
21. City: Jacksonville	22. County: Duval		23. State:		Zip Code:		
			Florida		256		
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.							
25. Date: 12 15/23			26. Signature of Candidate:				
			X Doronko Braden				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)							
O							
I, Brooke Bradydo hereby accept the appointment designated above as:							
(Please Print or Type Name)							
☐ Campaign Treasurer.			■ Deputy Treasurer.				
20 Patrice	53	29. Signature of C	Campaign Trea	surer of D	eputy Treasurer		
28. Date: 12/15/23			X Loronka Lorady				
DS-DE 9 (Eff. 10/23)  Rule 1S-2.001, F.A.C						1S-2.001, F.A.C.	