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.

RECEIVED

JUN 12 2024

DUVAL COUNTY FLEC.

OFFICE USE ONLY

opening the campaign account.	OT FICE OSE ONE
1. CHECK APPROPRIATE BOX(ES):	
☐ Initial Filing of Form 🐧 Re-filing to Change: ☐ Treasur	VA 14507 ■ 0.000 10807 09
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)	3242 Brown TROUT COURT,
MADINE EBICH	JACKSONVILLE, FLORIDA 32226
4. Telephone: 5. Candidate's Voter Registra	
(321) 501 - 7932 119645769 (not required for qualifying purpos	
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:	
Duvar Country School Bonto 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 Candidate. ☐	Party candidate.
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer	
11. Name of Treasurer or Deputy Treasurer:	12. Telephone: 13. Email Address:
MADINE EBEL	(321) 501-7932 NABINE EBICIE COMAILO
14. Mailing Address: 15. Cit	y: 16. State: 17. Zip Code:
3242 BROWN TROUT COWET JA	CKSONVILLE FLORIDA 3222C
18. I have designated the following bank as my (check appropriate box): 🖫 Primary Depository 🔲 Secondary Depository	
19. Name of Bank:	20. Address:
Yyster Credit Union	ounty: 20. Address: 1700 N MAIN ST. JACKSONVIUE 24. Zip Code:
21. City: 22. Co	unty: 23. State: 24. Zip Code:
OULESONO LEES DE	1VA, FIDEIDA 36606
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.	
	26. Signature of Candidate:
25. Date: June 12, 2024	X Mast
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)	
I, CABINE ZBEI (Please Print or Type Name)	do hereby accept the appointment designated above as:
Campaign Treasurer.	☐ Deputy Treasurer.
	29. Signature of Campaign Treasurer or Deputy Treasurer
28. Date: June 12, 2024	X Mass
DS-DE 9 (Rev. 09/23)	Rule 1S-2.0001, F.A.C.