

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

MAR 25 2024

DUVAL COUNTY ELEC.
BY CF

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):
(Please Print or Type Name)

Marcus Lee Andre Isom Jr

3. Address (include PO Box or Street, City, State, Zip Code):

[REDACTED]

4. Telephone:

[REDACTED]

5. Candidate's Voter Registration #:

123228860

(not required for qualifying purposes)

6. Email Address:

[REDACTED]

7. Office Sought (include district, circuit, group, or seat #):

Duval County Court Judge, Group 9

8. If a candidate for a nonpartisan office, check the box
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 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:

Nicole Isom

12. Telephone:

[REDACTED]

13. Email Address:

[REDACTED]

14. Mailing Address:

[REDACTED]

15. City:

[REDACTED]

16. State:

[REDACTED]

17. Zip Code:

[REDACTED]

18. I have designated the following bank as my (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

19. Name of Bank:

Vy Star Credit Union

20. Address:

10903 Baymeadows Road

21. City:

Jacksonville

22. County:

Duval

23. State:

Florida

24. Zip Code:

32256

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: 03/25/2024

26. Signature of Candidate:

X M. L. Isom Jr

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

I, Nicole Isom
(Please Print or Type Name) do hereby accept the appointment designated above as:

☐ Campaign Treasurer.

☒ Deputy Treasurer.

28. Date: March 25, 2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X Nicole Isom