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

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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 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip 338 E. Ashley ST 4. Telephone | 5. E-mail address JAX, F1 32202 (904) 800-8513 mcalloug 1_marc @yahoo 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: 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 My intent is to run as a Write-In candidate. Write-In No Party Affiliation Democratic Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer 11. Mailing Address 12. Telephone 12. Tele

338 E. Ashley 57.

13. City

14. County

15. State

16. Zip Code

17. E-mail address

DUVAL

18. State

3 zzoz (904) 800-8513 Primary Depository Secondary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address 21. City | 22. County | 50 NOATH LANGE ST | 24. Zip Code 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 26. Signature of Candidate 3-14-17 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. (Please Print or Type Name) , do hereby accept the appointment Deputy Treasurer. designated above as: Campaign Treasurer 3-14-17 Signature of Campaign Treasurer or Deputy Treasurer