

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

JAN 16 2018

DUVAL COUNTY ELEC.

By [Signature]

NOTE: This form must be on file with the qualifying 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 Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Voene Ha Satofa Dixon

3. Address (include post office box or street, city, state, zip code)

3964 Windy Gate Drive South
Jacksonville, FL 32218

4. Telephone

(904) 703-3165

5. E-mail address

voenehadixon@yahoo.com

6. Office sought (include district, circuit, group number)

City Council District 8

7. If a candidate for a nonpartisan 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 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

Jennifer M. Wilson

11. Mailing Address

1743 Biscayne Bay Circle

12. Telephone

(904) 859-9770

13. City

Jacksonville

14. County

Duval

15. State

FL

16. Zip Code

32218

17. E-mail address

jmwilson8704@gmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Wells Fargo

20. Address

899 Dunn Ave

21. City

Jacksonville

22. County

Duval

23. State

FL

24. Zip Code

32218

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

1-16-18

26. Signature of Candidate

[Signature]

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

I, Jennifer M. Wilson, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1-16-18

Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer