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 officer before opening the campaign account.

RECEIVED

FEB 01 2018

DUVAL COUNTY ELEC. By

OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) code) 3535 Riversicle Ave., Jacksonville, FL 32205 (Residence) 1650-302 Margaret Street Tacksonville, FL 4. Telephone 32204 (campaigi 6. Office sought (include district, circuit, group number) 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 candidate. 9. I have appointed the following person to act as my Deputy Treasurer Campaign Treasurer 10. Name of Treasurer or Deputy Treasurer homas 12. Telephone (410) 908-1444 13. City 15. State 17. E-mail address 16. Zip Code tom @votesunny.com Primary Depository 18. I have designated the following bank as my Secondary Depository 19. Name of Bank 20. Address 300 Adams Stree 21. City 22. County 23. State 24. Zip Code පිටුබර්ධ 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 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27.

(Please Print or Type Name)

Campaign Treasurer

X

Rule 1S-2.0001, F.A.C.

, do hereby accept the appointment

Deputy Treasurer.

Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 10/10)

designated above as: