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

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

(PLEASE PRINT OR TYPE)

RECEIVED

AUG 0 3 2018 DUVAL COUNTY ELEC.

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 Treasurer/Deputy Office Party Re-filing to Change: Depository 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip lorgan 4928 Top Royal Lane Jacksonville FL 32277 (904) 612-1952 danford joyce eyahoacom 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: Jacksonville City Council 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 12 Democratic Write-In No Party Affiliation 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 17. E-mail address 13. City 15. State 16. Zip Code agtax 956 Secondary Depository 18. I have designated the following bank as my \bowtie Primary Depository 20. Address 19. Name of Bank ombo 22. County 21. City 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 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. , do hereby accept the appointment (Please Print or Type Name) Deputy Treasurer designated above as: Campaign Treasurer Signature of Campaign Treasurer or Deputy Treasurer