APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

DS-DE 9 (Rev. 10/10)

RECEIVED

AUG 0 3 2018

DUVAL COUNTY ELEC. By

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

NOTE: This form must be on file with the qualifying officer before opening the campaign account.		OFFICE USE ONLY					ONLY	
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Defice Party								
2. Name of Candidate (in this order: Firs	st, Middle, Last)		ss (include post office				.ip	
Jaime D. Malone	code) 7707 Crsuperry LNS.							
4. Telephone 5. E-mail address (904) 428-396 Diciembre 1253 Cymar Jax, FL. 30048								
6. Office sought (include district, circuit,	group number)	7.	. If a candidate for a <u>ı</u>	<u>nonparti</u>	san office,	check	κ if	
· · · · · ·	1	applicable:						
Coonelmandis		My intent is				date.		
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a								
Write-In X No Party Affiliation				Pa	rty candi	idate.		
9. I have appointed the following perso	9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer							
10. Name of Treasurer or Deputy Treasurer								
JAIME D. MA	iore						· · · <u> </u>	
11. Mailing Address = 12. Telephone (908) 428-3961								
13. City			p Code 17. E-mail a	ddress	7 -0-	ر د		
	JAX DUVAL FC 37044 Diciombre 1253 Rgmaix							
18. I have designated the following bar	18. I have designated the following bank as my Primary Depository Secondary Depository							
19. Name of Bank Vystav 20. Address 1831 DUNN AUQ								
21. City 22.	County	2	23. State		24. Zip Co		•	
J 7/	DUUM		<i>b</i> 5		393	710	<u>}</u>	
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. Signatur	re of Candidate					
8/3/18 X Mud of on								
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)								
I, Johereby accept the appointment								
(Please Print or Type Name)								
designated above as: Campaign Treasurer Deputy Treasurer								
8/3/18 X (proces								
/ Date Signature of Campaign Treasurer or Deputy Treasurer								