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

OCT 1 0 2018

DUVAL COUNTY ELEC. By_____

| officer before opening the campaign account. | | | | | | | OFFIC | E USE | ONLY |
|--|----------------------|-----------|---|--------------------------------|-----------|------------------------|-----------|-------|-------|
| 1. CHECK APPROPRIATE BOX(ES): | | | | | | | | | |
| Initial Filing of Form | Re-filing to Change: | ☐ Trea | surer/Deputy | | Depositor | у 🔲 | Office | | Party |
| 2. Name of Candidate (in this order: First, Middle, Last) | | | 3. Address (include post office box or street, city, state, zip | | | | | | |
| J. "Carson" Tranquille | | | code) | | | | | | |
| 4. Telephone 5. | 5. E-mail address | | 10805 Peaceful Harbor Dr. | | | | | | |
| (904) 591-9554 jctr | ank@comcast.net | | Jacksonville, FL 32218 | | | | | | |
| 6. Office sought (include district, circuit, group number) | | | 7. If a candidate for a <u>nonpartisan</u> office, check if | | | | | | |
| City Council District #0 | | | applicable: My intent is to run as a Write-In candidate. | | | | | | |
| City Council District #2 | | | | | | | | | |
| 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 No Part | Democra | at | | | Par | ty car | ndidate. | | |
| 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer | | | | | | | | | |
| J. "Carson" Tranquille | | | | | | | | | |
| 11. Mailing Address | 12. Telephone | | | | | | | | |
| 10805 Peaceful Harbor Dr. | | | | | | (904) | 591-95 | 554 | |
| i i | 14. County | 15. State | 1 ' | 6. Zip Code 17. E-mail address | | | | | |
| lacksonville Duval | | FL | 32218 Wanda.tr | | | anquille11@comcast.net | | | |
| 18. I have designated the following bank as my | | | | | | | | | |
| 19. Name of Bank | 0. Address | | | | | | | | |
| Regions Bank | | 11 | 0 Busch Dr. | | | | | | |
| 21. City | 22. County | | 23. S | | | | 24. Zip (| Code | |
| Jacksonville | Duval | | Florid | a | | | 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 | | | 26. Signature of Candidate | | | | | | |
| 10/10/18 | | | x III | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | |
| I, J. CARSON TRANQUILLE , do hereby accept the appointment | | | | | | | ıt | | |
| (Please Print or Type Name) | | | | | | | | | |
| designated above as: Campaign Treasurer Deputy Treasurer | | | | | | | | | |
| 10/10/18 X Jell | | | | | | | | | |
| Date Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | | | |