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

JAN 03 2019

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 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip TERRANCE Edward FREEMAN 7367 Wood Ouck RE
Telephone 5. E-mail address Jacksonville, FL. 32244 4. Telephone 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: 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 My intent is to run as a Write-In candidate. Republican Write-In No Party Affiliation candidate. 9. I have appointed the following person to act as my 9. I have appointed and 10. Name of Treasurer or Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer 12. TERRANCE FREEMAN 12. Teleph **Deputy Treasurer** 13. City Primary Depository □ Secondary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address Fidelity Bank

Dity 22. County 23. State 24. Zip Code KSONV1/12 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 1-3-19 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) ERRANCE FREEMAN , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer. X Signature of Campaign Treasurer or Deputy Treasurer