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

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

(PLEASE PRINT OR TYPE)

RECEIVED

MAY 02 2019

DUVAL COUNTY ELEC.

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONL
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: T	easurer/Deputy Depository Deffice Part
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip code) (232 Stanis ct.

4. Telephone
5. E-mail address

Sparkes for School

Jackson III e, FL 32218

6. Office sought (include district, circuit, group number)

7. If a candidate for a nonpartisan office, check applicable:

7. If a candidate for a nonpartisan office, check if 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 No Party Affiliation Write-In candidate. Campaign Treasurer 9. I have appointed the following person to act as my **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer Dhennette 11. Mailing Address 12. Telephone 13. City 16. Zip Code 32218 Primary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address acksonville

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND

		DESIGNATI	UN UF U	AMPAIG	א טביטט	SHORT AND THAT THE FACTS STATED IN IT ARE TRUE.
25. Date	Ma	, 2	1		٥.	26. Signature of Candidate

Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

27. , do hereby accept the appointment

desic

gnated above	as:	Campaigr	Treasure	r 🔲	Deputy Treasure	er.	
May	2nd	2019	X				
,	Date	· <u> </u>		Signature	of Campaign Tre	easurer or Dep	uty Treasurer