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

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officer before opening the campaign account. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: Treasurer/Deputy Initial Filing of Form Depository Office Partv 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) Ronald Anthony Salem 4. Telephone 5. E-mail address 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) applicable: Duval County Court Judge, Group 16 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 Write-In No Party Affiliation Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer \mathbf{X} Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer Anthony Salem 11. Mailing Address 12. Telephone 13. City 14. County 15. State 16. Zip Code 17. E-mail address Jacksonville Duval Florida Primary Depository Secondary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address 8263 Philips Hwy VyStar Credit Union 23. State 24. Zip Code 21. City 22. County Florida 32256 Jacksonville Duval 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 8/1/19 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) designated above as: Campaign Treasurer Deputy Treasurer. Signature of Campaign Treasurer or Deputy Treasurer Date