

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

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

(PLEASE PRINT OR TYPE)

**RECEIVED**

OCT 14 2019

DUVAL COUNTY ELEC.  
By LS

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

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)

Erin Townsend Perry

**3. Address** (include post office box or street, city, state, zip code)

501 W. Adams Street  
Suite 7113  
Jacksonville, FL 32202

**4. Telephone**

(904 ) 255-1255

**5. E-mail address**

erinp@coj.net

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

Duval County Court Judge, Group 6

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

☐ 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 ☐ Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Mitchell Stone, Esq.

**11. Mailing Address**

1830 Atlantic Blvd

**12. Telephone**

( 904 ) 396-3335

**13. City**

Jacksonville

**14. County**

Duval

**15. State**

FL

**16. Zip Code**

32207

**17. E-mail address**

mitch@jacksonvilledefense.com

**18. I have designated the following bank as my** ☒ Primary Depository ☐ Secondary Depository

**19. Name of Bank**

CenterState

**20. Address**

5665 Normandy Blvd

**21. City**

Jacksonville

**22. County**

Duval

**23. State**

FL

**24. Zip Code**

32034

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**

October 14, 2019

**26. Signature of Candidate**

X Erin Townsend Perry

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

I, Mitchell Stone, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer

October 14, 2019  
Date

X [Signature]  
Signature of Campaign Treasurer or Deputy Treasurer