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

JAN 2 7 2020

DUVAL COUNTY E'LEC.

officer before opening the campaign account.								OFFIC	E USE	ONLY	
1. CHECK APPROPRIATE Initial Filing of Form	•	S): e-filing to Chan	ıge: 🔲 -	Treasurer	/Deputy	Deposito	ory _	Office		Party	
Name of Candidate (in this order: First, Middle, Last) Kelly Ginnette Coker					Address (include post office box or street, city, state, zip code) 4871 River Basin Drive North						
4. Telephone	one 5. E-mail address					Jacksonville, Fl. 32207					
(904) 7070126	kcoker	-daniel@coi	mcast.ne								
6. Office sought (include district, circuit, group number)					7. If a candidate for a nonpartisan office, check if						
School Board, District 1		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 Kelly G. Coker											
11. Mailing Address 12. Telephone											
4871 River Basin Drive North (904) 7070126								;			
13. City	14. County 15. Stat				e 16. Zip Code 17. E-mail address						
Jacksonville	32	32207 kcoker-daniel@comcast.net									
18. I have designated the following bank as my Primary Depository Secondary Depository											
19. Name of Bank 20. Address											
					011 San Marco Boulevard						
21. City		22. County			23. State			24. Zip C	ode		
Jacksonville		Duval			FL			32207			
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 1/27/20					26. Signature of Candidate X Muly Un						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
Kelly G. Coker					, do hereby accept the appointment						
(Please Print or Type Name)											
designated above as: Campaign Treasurer Deputy Treasurer.											
1/27/20 X Milly Stor											
' Date			•	-Signatud	e of Campaid	n Treasure	r or Depu	ty Treasura	or o		