

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

MAR 06 2020

DUVAL COUNTY ELEC.

By BB

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)  
Jimmy Midyette

3. Address (include post office box or street, city, state, zip code)  
PO Box 380002  
Jacksonville, Florida 32205

4. Telephone  
( 904 ) 228-4797

5. E-mail address  
jimmy.midyette@gmail.com

6. Office sought (include district, circuit, group number)  
Duval County Clerk of the Court

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     Democratic    Party candidate.

9. I have appointed the following person to act as my  Campaign Treasurer     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer  
Jimmy Midyette

11. Mailing Address  
PO Box 380002

12. Telephone  
( 904 ) 228-4797

13. City  
Jacksonville

14. County  
Duval

15. State  
FL

16. Zip Code  
32205

17. E-mail address  
jimmy.midyette@gmail.com

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

19. Name of Bank  
VyStar Credit Union

20. Address  
760 Riverside Avenue

21. City  
Jacksonville

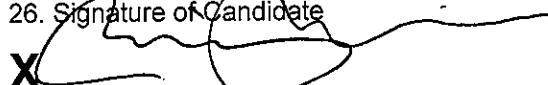
22. County  
Duval

23. State  
Florida

24. Zip Code  
32204

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  
March 6, 2020

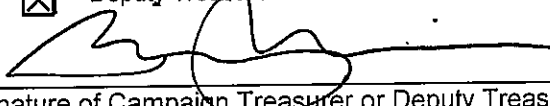
26. Signature of Candidate  


27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
I, Jimmy Midyette, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

March 6, 2020

X



Date

Signature of Campaign Treasurer or Deputy Treasurer