

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

APR 16 2020

DUVAL COUNTY ELEC.
By [Signature]

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)

Scott Wilson

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

4674 Town Center Parkway
Unit 161
Jacksonville, FL 32246

4. Telephone

(904) 626-0942

5. E-mail address

swilson004@gmail.com

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

Clerk of the Circuit & County 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 Republican Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

James Sorce

11. Mailing Address

4674 Town Center Parkway unit 161

12. Telephone

(904) 703-5189

13. City

Jacksonville

14. County

Duval

15. State

FL

16. Zip Code

32246

17. E-mail address

Sorce@bellsouth.net

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

19. Name of Bank

BBVA Compass

20. Address

3740 Beach Blvd.

21. City

Jacksonville

22. County

Duval

23. State

Florida

24. Zip Code

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

4-15-2020

26. Signature of Candidate

X [Signature]

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

I, James Sorce, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/15/2020

Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer