

**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 officer before opening the campaign account.

RECEIVED
2021 JUN 11 A 9:02
CITY OF OCALA, FLORIDA
CITY CLERK

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)

Curtis Lamar Jones

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

1013 NE 13th St
Ocala, FL
34470

4. Telephone

(352) 512-3693

5. E-mail address

streetsoutreach@mail.com

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

City Council District 4

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

Lucille Andrea Bryant

11. Mailing Address

2931 SE 52nd AVE Apt C

12. Telephone

(352) 207-2393

13. City

Ocala

14. County

marion

15. State

FL

16. Zip Code

34480

17. E-mail address

lucillebryant23@gmail.com

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

19. Name of Bank

Center State Bank

20. Address

1632 east silver springs blvd

21. City

Ocala

22. County

Marion

23. State

FL

24. Zip Code

34470

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

6-10-21

26. Signature of Candidate

X Curtis Jones

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

I, Lucille Andrea Bryant, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6-10-21
Date

X Lucille Andrea Bryant
Signature of Campaign Treasurer or Deputy Treasurer