

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

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

(PLEASE PRINT OR TYPE)

**RECEIVED**

JAN 14 2019

GERTRUDE WALKER  
SUPERVISOR OF ELECTIONS, ST LUCIE CO.

**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)

James Anthony Monds Jr.

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

1832 SE Bereshore Blvd  
Port St. Lucie, FL 34952

4. Telephone

(772) 200-1071

5. E-mail address

James.Monds@gmail.com

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

School Board District #2

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

Erica Ramos

11. Mailing Address

1832 SE Bereshore Blvd

12. Telephone

(772) 607-1977

13. City

Port St. Lucie

14. County

St. Lucie

15. State

FL

16. Zip Code

34952

17. E-mail address

Erica.Ramos@Yahoo.com

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

19. Name of Bank

Wells Fargo

20. Address

9520 S US Hwy 1

21. City

Fort Pierce

22. County

St. Lucie

23. State

FL

24. Zip Code

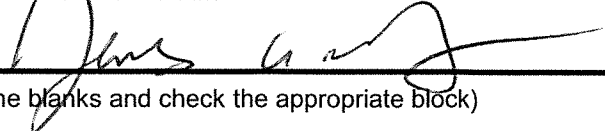
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**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

25. Date

1/13/19

26. Signature of Candidate



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

I, Erica G. Ramos, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

1/13/19  
Date

Erica G. Ramos  
Signature of Campaign Treasurer or Deputy Treasurer