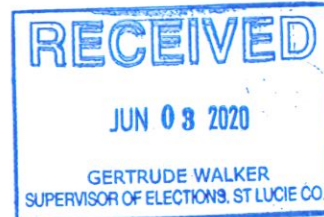


**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(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.

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)

Sheritta Davis Johnson

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

4888 Kings Hwy
Fort Pierce, FL 34951

4. Telephone

(772) 242-3599

5. E-mail address

vokesherittajohnson@gmail.com

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

St. Lucie County Supervisor of Elections

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

Sheritta Davis Johnson

11. Mailing Address

4888 Kings Hwy

12. Telephone

(772) 242-3599

13. City

Ft. Pierce

14. County

St. Lucie

15. State

FL

16. Zip Code

34951

17. E-mail address

vokesherittajohnson@gmail.com

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

19. Name of Bank

Seacoast Bank

20. Address

1901 S. US Hwy 1

21. City

Ft. Pierce

22. County

St. Lucie

23. State

FL

24. Zip Code

34950

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

4/1/20

26. Signature of Candidate

X Sheritta Johnson

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

I, Sheritta Davis Johnson, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/1/20

Date

X Sheritta Johnson

Signature of Campaign Treasurer or Deputy Treasurer