



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):
[checked] Initial Filing of Form Re-filing to Change: [ ] Treasurer/Deputy [ ] Depository [ ] Office [ ] Party

2. Name of Candidate (in this order: First, Middle, Last) Jolien Marie Caraballo
3. Address (include post office box or street, city, state, zip code) 950 SE Browning Ave Port St Lucie, FL 34983

4. Telephone (772) 618-5437
5. E-mail address jcaraballo@aol.com

6. Office sought (include district, circuit, group number) Port St Lucie 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 [checked] Campaign Treasurer [ ] Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer Daniel Kurek

11. Mailing Address 2138 SE Herron Ave
12. Telephone (772) 342-4230

13. City Port St. Lucie 14. County St. Lucie 15. State FL 16. Zip Code 34952 17. E-mail address DANIKUREK1949@gmail.com

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

19. Name of Bank Center State Bank 20. Address 9815 S US Highway 1

21. City Port St. Lucie 22. County St. Lucie 23. State Florida 24. Zip Code 34952

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 03/02/2020 26. Signature of Candidate [checked] Jolien Caraballo

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

I, Daniel Kurek, do hereby accept the appointment (Please Print or Type Name)

designated above as: [checked] Campaign Treasurer [ ] Deputy Treasurer.

Date 3/2/2020 [checked] Signature of Campaign Treasurer or Deputy Treasurer

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