

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(2) and 106.021(1), F.S.)

SUPERVISOR
OF ELECTIONS

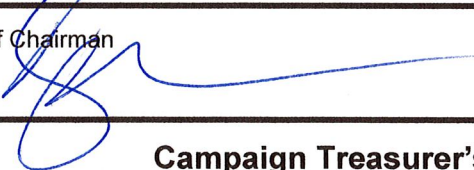
2019 JAN 24 PM 12:58

ST JOHN'S COUNTY
VICKY OAKES

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Initial Filing of Form Re-filing to Change: Primary Treasurer Deputy Treasurer Primary/Secondary Depository

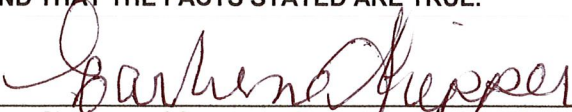
| | | | |
|---|--|--|------------------------------|
| 1. Committee or Organization TRUMP CLUB OF SAINT JOHN'S COUNTY | | 2. Telephone (904) 940 8727 | |
| 3. Name of Treasurer or Deputy Treasurer EARLIENE SHIPPER | | 4. Email (optional) E.SHIPPER@TRUMPCLUBS@GMAIL.COM | |
| 5. Telephone (optional) (416) 245 8141 | | | |
| 6. Mailing Address 2800 N 6TH ST, SUITE 1, PMB 248, ST AUG 32084 | | | |
| 7. Street Address 739 COPPERHEAD CIR, ST AUG, FL 32092 | | | |
| 8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository | | | |
| 9. Name of Bank VYSTAR CREDIT UNION | | 10. Street Address 1955 COUNTY RD 210 | |
| 11. City ST JOHN | | 12. State FL | 13. Zip Code 32259 |
| 14. Signature of Chairman X  | | 15. Name of Chairman (Print or Type) Earlene Shipper | |

Campaign Treasurer's Acceptance of Appointment

I, **EARLIENE SHIPPER**, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for **TRUMP CLUB OF SAINT JOHN'S COUNTY**
(Committee or Organization)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

1/23/19
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer