

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR
OF ELECTIONS

2020 JUN -4 AM 10:31

ST JOHNS COUNTY
VICKY OAKES

**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)

Anthony Ellis Coleman

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

P.O. Box 113

4. Telephone

[REDACTED]

5. E-mail address

Anthony.E.Coleman@prophaz.com

[REDACTED]

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

District #2 School Board

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 ~~Non-Partisan~~ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Anthony E Coleman

11. Mailing Address

P.O. Box 113

12. Telephone

[REDACTED]

13. City

[REDACTED]

14. County

[REDACTED]

15. State

[REDACTED]

16. Zip Code

[REDACTED]

17. E-mail address

Anthony.Coleman@prophaz.com

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

19. Name of Bank

Capital City Banks

20. Address

207 Main St Hastings

21. City

Hastings

22. County

ST. JOHNS

23. State

FL

24. Zip Code

32145

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

6/4/20

26. Signature of Candidate

X [Signature] E Coleman

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

I, Anthony E Coleman, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/4/20

Date

X [Signature] E Coleman

Signature of Campaign Treasurer or Deputy Treasurer