

**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.**

SUPERVISOR
OF ELECTIONS

2019 DEC 23 PM 1:43

ST. JOHN'S COUNTY
WICKY OAKES

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)

Felicia Marie Proia

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

867 W 13th St.
St. Augustine, FL
32084

4. Telephone

(904) 540-8248

5. E-mail address

felicia.proia@gmail.com

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

Anastasia Mosquito Control, Seat 3

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

Felicia Marie Proia

11. Mailing Address

867 W 13th St.

12. Telephone

(904) 540-8248

13. City

St. Augustine

14. County

St. Johns

15. State

FL

16. Zip Code

32084

17. E-mail address

felicia.proia@gmail.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

Vystar Credit Union

20. Address

165 FL-312 West

21. City

St. Augustine

22. County

St. Johns

23. State

FL

24. Zip Code

32084

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

12/23/19

26. Signature of Candidate

☒ 

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

I, Felicia Marie Proia, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

12/23/19

Date

☒


Signature of Campaign Treasurer or Deputy Treasurer