

**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

2020 FEB 19 PM 12:41

ST JOHN'S COUNTY
VICKY DAKES

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)

Jan Cardia

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

*92 Sweet Pine Trail
Ponte Vedra, FL 32081*

4. Telephone

(302) 983-7551

5. E-mail address

jancardia@aol.com

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

Anastasia Mosquito Control District Seat 1

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

Jan Cardia

11. Mailing Address

92 Sweet Pine Trail

12. Telephone

(302) 983-7551

13. City

Ponte Vedra

14. County

St Johns

15. State

FL

16. Zip Code

32081

17. E-mail address

jancardia@aol.com

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

19. Name of Bank

Vystar

20. Address

100 Village Lake Dr

21. City

Ponte Vedra

22. County

St Johns

23. State

FL

24. Zip Code

32081

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

2/19/20

26. Signature of Candidate

X *Jan Cardia*

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

I, *Jan Cardia*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2/19/20
Date

X *Jan Cardia*
Signature of Campaign Treasurer or Deputy Treasurer