

**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 APR 17 AM 10:43

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)**

**Nick Graham**

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

1020 W Aiken St.  
Saint Augustine, FL 32084  
St. Saint Augustine, FL 32084

**4. Telephone**

(904) 315-2805

**5. E-mail address**

vote@nickgraham.us

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

St. Johns County School Board District 2

**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**

Theodore Kersey

**11. Mailing Address**

10430 Flikkema Avenue

**12. Telephone**

(904) 432-6340

**13. City**

Hastings

**14. County**

St. Johns

**15. State**

FL

**16. Zip Code**

32145

**17. E-mail address**

hydroman23mfl@gmail.com

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

**19. Name of Bank**

BBVA

**20. Address**

155 Corridor Rd.

**21. City**

Ponte Vedra Beach

**22. County**

St. Johns

**23. State**

FL

**24. Zip Code**

32082

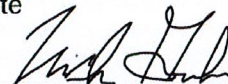
**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

03/29/2020

**26. Signature of Candidate**

X



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

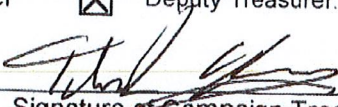
I, Theodore Kersey, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

03/29/2020

Date

X

  
Signature of Campaign Treasurer or Deputy Treasurer