

2020 MAY -1 AM 10:38

ST JOHNS COUNTY VICKY OAKES

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.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

[X] Initial Filing of Form Re-filing to Change: [ ] Treasurer/Deputy [ ] Depository [ ] Office [ ] Party

2. Name of Candidate (in this order: First, Middle, Last)

ROXANNE HORWATH

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

25 SOUTH STREET ST. AUGUSTINE, FL 32084

4. Telephone

(904) 806-4329

5. E-mail address

DVOARCH@COMCAST.NET

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

CITY OF ST. AUGUSTINE CITY COMMISSION 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 [X] Campaign Treasurer [ ] Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

ROXANNE HORWATH

11. Mailing Address

25 SOUTH STREET

12. Telephone

(904) 806-4329

13. City

ST. AUGUSTINE

14. County

ST. JOHNS

15. State

FL

16. Zip Code

32084

17. E-mail address

DVOARCH@COMCAST.NET

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

19. Name of Bank

BANK OF AMERICA

20. Address

60 CATHEDRAL PLACE

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

MAY 1, 2020

26. Signature of Candidate

[X] [Signature]

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

I, ROXANNE HORWATH, do hereby accept the appointment (Please Print or Type Name)

designated above as: [X] Campaign Treasurer [ ] Deputy Treasurer.

MAY 1, 2020 Date

[X] [Signature] Signature of Campaign Treasurer or Deputy Treasurer