

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**  
(Section 106.021(1), F.S.)

SUPERVISOR  
OF ELECTIONS

2020 JUN -2 PM 4:46

(PLEASE PRINT OR TYPE)

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)

William H. Clarke

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

212 West Benkswell Dr.  
St Johns FL 32259

4. Telephone

(215) 262-7127

5. E-mail address

whclarke53@gmail.com

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

Dorbin Crossing CDD Seat 4

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

Stacy C Clarke

11. Mailing Address

212 West Benks well Dr.

12. Telephone

(719) 510 7581

13. City

St. Johns

14. County

St. Johns

15. State

FL

16. Zip Code

32259

17. E-mail address

stacy.c.clarke@gmail.com

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

19. Name of Bank

Navy Federal Credit Union

20. Address

P.O. Box 3000

21. City

Merrifield

22. County

23. State

VA

24. Zip Code

22119

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

6/1/20

26. Signature of Candidate

X 

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

I, Stacy C Clarke, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

6/1/20  
Date

X

  
Signature of Campaign Treasurer or Deputy Treasurer