

**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 JUN 10 PM 12:32

ST JOHNS COUNTY
VICKY 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)

Catherine Elizabeth Brandhorst

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

220 Whispering Woods Lane
St Augustine 32084

4. Telephone

(904) 377-0780

5. E-mail address

chb618@att.net

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

Catherine Brandhorst

11. Mailing Address

220 Whispering Woods Lane Apt 12

12. Telephone

(904) 377 0780

13. City

St Augustine

14. County

St Johns

15. State

FL

16. Zip Code

32084

17. E-mail address

chb618@att.net

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

19. Name of Bank

Bank of America

20. Address

Ponce Mall 2131 Hwy 1 St Augustine

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

6-10-2020

26. Signature of Candidate

X Catherine Brandhorst

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

I, Catherine Brandhorst, do hereby accept the appointment

(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

6-10-2020

Date

X

Catherine Brandhorst
Signature of Campaign Treasurer or Deputy Treasurer