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.

DS-DE 9 (Rev. 10/10)

SUPERVISOR OF ELECTIONS

2022 JAN 10 PM 4: 59

ST JOHNS COUNTY

Rule 1S-2.0001, F.A.C.

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) 3. Address (include post office box or street, city, state, zip 3720 County Rd. 214 4. Telephone 81. Augustine, FL 32092 (904) 826-7974 Chine 4 Dyahos. com

6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: My intent is to run as a Write-In candidate. Commissioner Dist 2 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 candidate. 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer Lynn Cline 11. Mailing Address 12. Telephone (904) 325-8475 15. State 17. E-mail address 13. City 16. Zip Code てレ 32092 Cline 4 a vahoo com 18. I have designated the following bank as my Primary Depository □ Secondary Depository 19. Name of Bank 20. Address 23. State 22. County 24. Zip Code 22092 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 26. Signature of Candidate an. 10 2022 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer designated above as: Deputy Treasurer. Signature of Campaign Treasurer or Deputy Treasurer