

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

SUPERVISOR  
OF ELECTIONS

2022 JAN 27 PM 3:38

ST JOHN'S COUNTY  
VICKY GAKER

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)

ROXANNE HORVATH

**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 COMMISSION  
MAYOR OF ST. AUGUSTINE, SEAT 3

**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**

PETER RUMPEL

**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**  Primary Depository     Secondary Depository

**19. Name of Bank**

BANK OF AMERICA

**20. Address**

2135 US-1 S

**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**

1/27/2022

**26. Signature of Candidate**



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

I, PETER RUMPEL, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

1/27/2022  
Date

  
Signature of Campaign Treasurer or Deputy Treasurer