

**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 APR 22 PM 2: 13

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)

GARY Howell

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

170 Harvest Ln
St. Augustine FL
32084

4. Telephone

(904) 669-3591

5. E-mail address

g-howell@att.net

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

Anastasia Mosquito Control District
seat 2

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

JAMES J SMITH

11. Mailing Address

2131 Toco tee

12. Telephone

(576) 419-6873

13. City

St. Augustine

14. County

St. Johns

15. State

FL

16. Zip Code

32092

17. E-mail address

insurance@jasonj@alco

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

19. Name of Bank

AMERIS BANK

20. Address

100 South park Blvd

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

4-22-2022

26. Signature of Candidate

X Gary Howell

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

I, JAMES J SMITH, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

04/22/22
Date

X James J Smith
Signature of Campaign Treasurer or Deputy Treasurer