

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR  
OF ELECTIONS

2023 JAN -5 AM 8:46

ST JOHN'S COUNTY  
VICKY BAKES

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 HUGO FREEMAN

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

3210 CROSS CREEK PL.  
ST. AUGUSTINE FL. 32086

**4. Telephone**

(386) 965-0644

**5. E-mail address**

bille@coastal-engineer.com

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

COUNTY COMMISSIONER DIST. 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     REPUBLICAN Party candidate.

**9. I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

REBECCA M. FREEMAN

**11. Mailing Address**

3210 CROSS CREEK PL ST. AUGUSTINE FL 32086

**12. Telephone**

(386) 965-4123

**13. City**

ST. AUGUSTINE

**14. County**

ST. JOHN'S

**15. State**

FL

**16. Zip Code**

32086

**17. E-mail address**

becca.freeman@hotmail.com

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

**19. Name of Bank**

VYSTAR CREDIT UNION

**20. Address**

165 FL-312

**21. City**

ST. AUGUSTINE

**22. County**

ST. JOHN'S

**23. State**

FL

**24. Zip Code**

32086

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**

1/3/23

**26. Signature of Candidate**

X *William H Freeman*

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

I, REBECCA MASTERS FREEMAN, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer.     Deputy Treasurer.

1/3/23  
Date

X *Rebecca M Freeman*  
Signature of Campaign Treasurer or Deputy Treasurer