

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)
(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

JAN 23 2024

ST. JOHNS COUNTY

NOTE: This form must be on file with the filing 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): (Please Print or Type Name) Jennifer Pomar Ravan	3. Address (include PO Box or Street, City, State, Zip Code): 3701 Winterhawk Ct St Augustine, FL 32086
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4. Telephone: (904) 907-5298	5. Candidate's Voter Registration #: 107981208 <small>(not required for qualifying purposes)</small>	6. Email Address: vote4ravan@gmail.com
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7. Office Sought (include district, circuit, group, or seat #): Tax Collector	8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable: <input type="checkbox"/> I intend to run as a Write-In Candidate.
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9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. Republican Party candidate.

10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer: Erika Ward	12. Telephone: (904) 797-7753	13. Email Address: ej_ward@att.net
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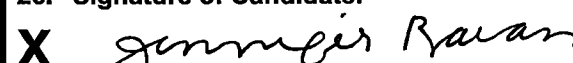
14. Mailing Address: 5010 Datil Pepper Rd	15. City: St Augustine	16. State: FL	17. Zip Code: 32086
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18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank: Ameris Bank	20. Address: 790 Ponce De Leon Blvd
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21. City: St Augustine	22. County: St Johns	23. State: FL	24. Zip Code: 32084
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UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

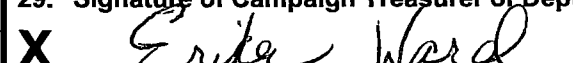
25. Date: 01/23/2024	26. Signature of Candidate: 
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27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)

I, Erika Ward do hereby accept the appointment designated above as:

(Please Print or Type Name)

Campaign Treasurer. Deputy Treasurer.

28. Date: 01/23/2024	29. Signature of Campaign Treasurer or Deputy Treasurer 
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