

**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 29 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)

Robert Keith Mathis, Jr.

3. Address (include PO Box or Street, City, State, Zip Code):

[REDACTED]

4. Telephone:

[REDACTED]

5. Candidate's Voter Registration #:

[REDACTED]

6. Email Address:

captainlb@hotmail.com

7. Office Sought (include district, circuit, group, or seat #):

St. Johns County Commision District 3

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

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:

Kristen Wiles

12. Telephone:

(904) 536-1288

13. Email Address:

14. Mailing Address:

6699 Brevard Street

15. City:

St. Augustine

16. State:

FL

17. Zip Code:

32080

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

Barwick Banking Company

20. Address:

1200 Plantation Island Dr S #110

21. City:

St. Augustine

22. County:

St. Johns

23. State:

FL

24. Zip Code:

32080

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:

1/29/2024

26. Signature of Candidate:

X Robert K Mathis Jr

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

I, Kristen Wiles

(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

28. Date:

1/29/2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X Kristen Wiles