

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

APR 12 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)

Bethany Kay Hilbert

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

107 Arpieka Ave  
St. Augustine, FL  
32080

4. Telephone:

(904) 824-9402

5. Candidate's Voter Registration #:

108057892  
(not required for qualifying purposes)

6. Email Address:

bethanyhilbertd5@gmail.com

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

St. Johns County School Board District 5

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.     \_\_\_\_\_ Party candidate.

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

11. Name of Treasurer or Deputy Treasurer:

Bethany Hilbert

12. Telephone:

(904) 824-9402

13. Email Address:

bethanyhilbertd5@gmail.com

14. Mailing Address:

107 Arpieka Ave

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:

Ameris

20. Address:

790 N Ponce de Leon 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 THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date: 4/12/2024

26. Signature of Candidate:

X Bethany Hilbert

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

I, Bethany Hilbert do hereby accept the appointment designated above as:  
(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date: 4/12/2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X Bethany Hilbert