

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

RECEIVED

MAR 07 2018

City Clerk

I, Shandy Thompson ,

candidate for the office of Council Member District 1 Seat 4 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X Shandy Thompson
Signature of Candidate

3.6.2018
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

MAR 07 2018

City Clerk

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)

Shandy Blair Williams Thompson

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

522 3rd Ave S.
Jacksonville Beach FL 32250

4. Telephone

(904) 738-5732

5. E-mail address

voteshandythompson@gmail.com

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

City Council Seat 4, District 1

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

Shandy Blair Williams Thompson

11. Mailing Address

522 3rd Ave S.

12. Telephone

(904) 738-5732

13. City

Jacksonville

14. County

Duval

15. State

FL

16. Zip Code

32250

17. E-mail address

VoteShandyThompson@gmail.com

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

19. Name of Bank

Wells Fargo

20. Address

233 3rd St. N

21. City

Jacksonville

22. County

Duval

23. State

FL

24. Zip Code

32250

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

March 6, 2018

26. Signature of Candidate

Shandy Thompson

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

I, Shandy Thompson, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

March 6, 2018

Date

Shandy Thompson

Signature of Campaign Treasurer or Deputy Treasurer

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

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

(PLEASE PRINT OR TYPE)



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)
Shandy Blair Williams Thompson

3. Address (include post office box or street, city, state, zip code)
522 3rd Ave S.

4. Telephone
(904) 738-5732

5. E-mail address
vote.shandythompson@gmail.com

Jacksonville Beach FL 32250

6. Office sought (include district, circuit, group number)
City Council Seat 4, District 1

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
Meyacir Lozada

11. Mailing Address
4506 Capital Dome Drive

12. Telephone
(614) 906-2953

13. City
Jacksonville

14. County
Duval

15. State
FL

16. Zip Code
32246

17. E-mail address
Meya.Lozada@gmail.com

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

19. Name of Bank
Wells Fargo

20. Address
233 3rd St. N

21. City
Jacksonville

22. County
Duval

23. State
FL

24. Zip Code
32250

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
March 6, 2018

26. Signature of Candidate
X Shandy Thompson

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

I, Meyacir Lozada, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

March 6, 2018
Date

X
Signature of Campaign Treasurer or Deputy Treasurer