

Redactions have been made pursuant
to Fla. Stat. Section 119.071(z)(II)(A)(B)

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

RECEIVED
JUN 05 2025
CITY CLERK

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)

Judy Mollica

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

Delray Beach, FL 33444

4. Telephone:

5. Candidate's Voter Registration #:

6. Email Address:

JudyMollica@gmail.com

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

Delray Beach City Commission Seat 2

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:

Christine Jax

12. Telephone:

(561)891-1680

13. Email Address:

Christine_Jax@yahoo.com

14. Mailing Address:

221 NW 4th Ave

15. City:

Delray Beach

16. State:

FL

17. Zip Code:

33444

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

19. Name of Bank:

Paradise Bank

20. Address:

1351 North Federal Highway

21. City:

Delray Beach

22. County:

Palm Beach

23. State:

FL

24. Zip Code:

33483

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: 6-5-2025

26. Signature of Candidate:

X Judy Mollica

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

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

Campaign Treasurer.

Deputy Treasurer.

28. Date: 6-5-2025

29. Signature of Campaign Treasurer or Deputy Treasurer

X Christine Jax