## 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 filing officer before opening the campaign account.

2024 FEB -2 AM 11: 44

OROWARD COUNTY PRYSON OF FUECTH**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 of	3. Address (include PO Box or Street, City, State, Zip Code):						
(Please Print or Type Name)			888S. Andrews Ave, Suite 203				
Melinda (Mindy) Kirsch Brown			Fort Lauderdale, Florida 33316				
4. Telephone:	tion #:   6. Email Ac	ion #:   6. Email Address:					
(954 ) <sup>6478145</sup> 101495814 (not required for qualifying purpose			mindy_brown@msn.com				
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a nonpartisan office, check the						office, check the box	
17 Judicial Circuit, Broward County, Group 23 ☐ 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:			12. Telephone:	13. Email Address:		Address:	
Melinda Kirsch Brown			(954 ) 647-8145 mindy_brown@			rown@msn.com	
14. Mailing Address:					6. State: 17. Zip Code		
888S. Andrews Ave, Suite 203		Fort Lauderdale		FL		33316	
18. I have designated the following bank as my (check appropriate box): I Primary Depository  Secondary Depository							
19. Name of Bank:	20. Address:						
FIRST HORIZON		22 Co	1201 S Andrew		-4	24 Zin Codo:	
21. City: Fort Lauderdale		22. Co		23. State:		24. Zip Code: 33316	
A Commence of the Commence of		Broward					
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: February 1, 2024			26. Signature of Candidate:				
zo. Butc.			X / less	v de	200	ou	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)							
Molinda Kirsch Brown							
Melinda Kirsch Browndo hereby accept the appointment designated above as:  (Please Print or Type Name)							
■ Campaign Treasurer. □ Deputy Treasurer.							
Fohruary 1, 2024			29. Signature of Campaign Treasurer or Deputy Treasurer				
28. Date: February 1, 2024			X Well	rde	2 50	on	
DS-DE 9 (Rev. 09/23)					Ru	le 1S-2.0001, F.A.C.	

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OFFICE USE ON

		-	- St			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):			3. Address (include PO Box or Street, City, State, Zip Code):					
(Please Print or Type Name)			888S. Andrews Ave, Suite 203					
Melinda (Mindy) Kirsch Brown			Fort Lauderdale, Florida 33316					
'								
4. Telephone:	5. Candidate's Voter	Registra	⊥ ation #:	ddress:				
(054 ) 6478145	101495814	mindy_brown@msn.com						
(954 )	(not required for quality				The second secon			
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box								
17 Judicial Circuit, Broward County, Group 23 if applicable:								
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 Condidate No Dark ASSULUTION IN CO.								
						Party candidate.		
10. I have appointed the following person to act as my:   Campaign Treasurer  Deputy Treasurer								
11. Name of Treasurer or Deputy Treasurer:			12. Telephone:		13. Email Address:			
Michael Salazar		(954 ) 249-3193			michaelSalazarjr@aol.d			
14. Mailing Address:		15. Cit		16. St		17. Zip Code:		
888S. Andrews Ave, Suite 203		Fort Lauderdale		FL		33316		
18. I have designated the following bank as my (check appropriate box): ■ Primary Depository □ Secondary Depository								
19. Name of Bank: 20. Address:								
FIRST HORIZON			1201 S Andrew	s Ave				
21. City:		22. County:		23. State:		24. Zip Code:		
Fort Lauderdale		Broward		FL		33316		
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: <sup>February</sup> 2, 2024		26. Signature of Candidate:						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
, Michael Salazardo hereby accept the appointment designated above as:								
(Please Print or	Type Name)							
	Campaign Treasurer.		Deputy T	reasurer				
28. Date: February 2, 2024		29. Signature of Campaign Treasurer or Deputy Treasurer						
DS-DE 9 (Rev. 09/23)					Ru	le 1S-2.0001, F.A.C.		

## STATEMENT OF CANDIDATE FOR JUDICIAL OFFICE

(Section 105.031(5), F.S.) (Please Type)

## OFFICE USE ONLY

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AROWARD COUNTY
OF PLECTIONS

I, Melinda (Mindy) Kirsch Brown					
a judicial candidate, have received, read, and understand the requirements					
of the Florida Code of Judicial Conduct.					
Melinea Brown (Signature of candidate)					
$\frac{2/1/24}{\text{(Date)}}$					

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation

of Campaign Depository.