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.

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officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
MARK D. BOGEN	code) I EAST BROWARD BIVE.
4. Telephone 5. E-mail address	Suite 700
(702)210-2545 marke condolaw.com	Ft. Laudedale, FC 33301
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
0 16 6	applicable:
Broward County Commission - Dist 2	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	emocratic Party candidate.
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer	
MARK D. BOGEN	
11. Mailing Address	12. Telephone
1 East Broward Blud. Suite	700 (954)525-0751
13. City 14. County 15. St. Ft. Landerdole Broward FL	16. Zip Code 17. E-mail address 33301 Mark & Condolaw. Com
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank	20. Address
Bank of America	2000 Glades Rd.
21. City 22. County Boca Caton Peach	23. State 24. Zip Code
	. Florida 33431
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 / /	26. Signature of Candidate
5/9/16	X March Bagler
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
I, Mark Bogen, do hereby accept the appointment	
(Please Print or Type Name)	
designated above as: Campaign Treasurer Deputy Treasurer.	
5/9/16 X	Mail bogen
Date	Signature of Campaign/Treasurer or Deputy Treasurer

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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) 3. Address (include post office box or street, city, state, zip MARK D. BOGEN I EAST BROWARD BLUD 4. Telephone SUITE 700 (702)210-7545 mark@ Condolaw. com Ft. Lauderdale, Fr 33301 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: My intent is to run as a Write-In candidate. Droward County Commission - LIST 2 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 Democratic Party candidate. 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer Mathen 11. Mailing Address 12. Telephone 495 NW (561)613-5820 13. City 14. County 15. State 17. E-mail address 16. Zip Code FL 33071 mattgotha @ gmail. com 18. I have designated the following bank as my Primary Depository Secondary Depository 19. Name of Bank 20. Address 2000 Glades Kd. 21. City 24. Zip Code Boca Ka 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 26. Signature of Candidate 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) Jotha , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer. Date Signature of Campaign Treasurer or Deputy Treasurer