Amend

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

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

(PLEASE PRINT OR TYPE)

2018 JUN 22 AM 9: 22

BROWARD COUNTY SUPERVISOR OF ELECTIONS

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: ☐ Ti	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
Veronica New Meyer	code) 740 SW 4 St
4. Telephone 5. E-mail address	Hallandale Bch, FL 33009
(954)865-8614 newmeyer 2018@gma	1 t Mc
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Broward School Board District 1	applicable:  My intent is to run as a Write-In candidate.
8. <b>If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable:</b> 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	
11. Mailing Address	12. Telephone
5101 Washinston Street	(954) 298-5827
13. City Hollywood Broward FL	
18. I have designated the following bank as my	
19. Name of Bank 20. Address	
Wells Farge	4100 Hollywood Blud., FL 33021
21. City 22. County Hollywood Broward	23. State 24. Zip Code
70000	· · · · · · · · · · · · · · · · · · ·
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 / 0.0 / 100	26. Signature of Candidate
6/22/18	X keronica/ Leumeyer
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
I, Laura Furlan (Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasurer Deputy Treasurer.	
6-21-18 X avra Fulan	
Date	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)

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BROWARD SOUNTY BURENVISOR OF ELECTIONS

officer before opening the campaign account. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy X Depository Office Party 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) Veronica Newmeyer 740 SW 4 St Hallandale Beach, FL 33009 4. Telephone 5. E-mail address (954) 865-8614 newmeyer2018@gmail.com 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if School Board of Broward County District 1 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 X **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer eronica 11. Mailing Address 12. Telephone 954 865-861 13. City 17. E-mail address 15. State 16. Zip Code conewneyer 2018 gmail.com 18. I have designated the following bank as my X Primary Depository Secondary Depository 19. Name of Bank 20. Address Wells Fargo 21. City 22. County 23. State 24. Zip Code Hollywood Broward 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 6.21.2018 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. , do hereby accept the appointment designated above as: Campaign Treasurer Deputy Treasurer. Date