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

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BROWARD COUNTY SUPERVISOR OF ELECTIONS

officer before opening the campaign account.				OFFICE USE ONLY								
1. CHECK APPROPRIATE	BOX(ES):	,										
☑ Initial Filing of Form	Re-fili	ing to Change:	☐ Tre	easurer/D	Deputy [D epository		Office		Party		
2. Name of Candidate (in this order: First, Middle, Last)				3. Address (include post office box or street, city, state, zip								
JEFFREY S. FREEMAN				code) 1401 MADISON STREET #3								
4. Telephone	elephone 5. E-mail address					HOLLYWOOD, FL 33020						
(954) 817-5450	JEFF_RE	EALITYSEDO	GEMED				, in the second					
6. Office sought (include district, circuit, group number)				7. If a candidate for a <u>nonpartisan</u> office, check if								
SCHOOL BOARD DISTRICT #1				applicable:								
				My intent is to run as a Write-In candidate.								
8. If a candidate for a <u>partisan</u> 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 Z Campaign Treasurer Deputy Treasurer												
10. Name of Treasurer or I		asurer	-									
RACHEL K. SILBE	ER			*****************						,		
11. Mailing Address	12. Telephone											
3907 SHERIDAN					993	<u>-53</u>	55					
13. City					· · · · · · · · · · · · · · · · · · ·							
HOLLYWOOD BROWARD FLOR			FLORI									
18. I have designated the following bank as my Primary Depository Secondary Depository												
19. Name of Bank 20. Address												
WELD FAM	30			180		. Jarra	7	ec 16				
21. City					23. State			24. Zip Code				
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							
SEPTEMBER 25TH, 2017 X												
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I,, do hereby accept the appointment												
(Please Print or Type Name)												
designated above as:	designated above as: Campaign Treasurer Deputy Treasurer.											
SEPTEMBER 25TH, 2017 X												
Signature of Campaign Treasurer or Deputy Treasurer												

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

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BROWARD COUNTY SUPERVISOR OF ELECTIONS

1, JETTEEY FEETHAN,							
candidate for the office of School Boses - District ;							
have been provided access to read and understand the requirements of							
Chapter 106, Florida Statutes.							
X Signature of Candidate 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).