

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

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

(PLEASE PRINT OR TYPE)

2018 APR 10 AM 10:03

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:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

Nathalie Adams

**3. Address** (include post office box or street, city, state, zip code)

6215 NW 80th Terrace  
Parkland, FL 33067

**4. Telephone**

(954) 383-4028

**5. E-mail address**

nathalie.adams@ymail.com

**6. Office sought** (include district, circuit, group number)

Broward  
School Board district 4

**7. If a candidate for a nonpartisan office, check if 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     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Mark Adams

**11. Mailing Address**

6215 NW 80th Terrace, FL 33067

**12. Telephone**

(954) 798-6977

**13. City**

Parkland

**14. County**

Broward

**15. State**

FL

**16. Zip Code**

33067

**17. E-mail address**

markadams66@ymail.com

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

Spaco Coast

**20. Address**

11505 W Sample Rd

**21. City**

Coral Springs

**22. County**

Broward

**23. State**

FL

**24. Zip Code**

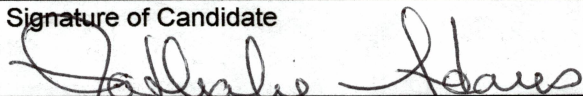
33065

**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**

4/10/18

**26. Signature of Candidate**



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

I, Mark Adams, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

4-10-18  
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)

2018 APR 10 AM 10:10

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:  Treasurer/Deputy     Depository     Office     Party

2. Name of Candidate (in this order: First, Middle, Last)

Nathalie Adams

3. Address (include post office box or street, city, state, zip code)

6215 NW 80th Terrace  
Parkland, FL 33067

4. Telephone

(954) 383-4028

5. E-mail address

nathalie.adams@ymail.com

6. Office sought (include district, circuit, group number)

School Board district 4

7. If a candidate for a nonpartisan office, check if 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     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Nathalie Adams

11. Mailing Address

6215 NW 80th Terrace

12. Telephone

(954) 383-4028

13. City

Parkland

14. County

Broward

15. State

FL

16. Zip Code

33067

17. E-mail address

nathalie.adams@ymail.com

18. I have designated the following bank as my  Primary Depository     Secondary Depository

19. Name of Bank

Space Coast

20. Address

11505 W Sample Rd

21. City

Coral Springs

22. County

Broward

23. State

FL

24. Zip Code

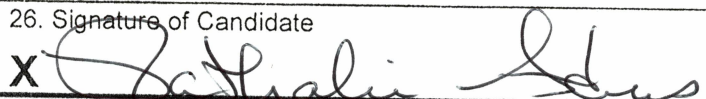
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25. Date

4/10/18

26. Signature of Candidate

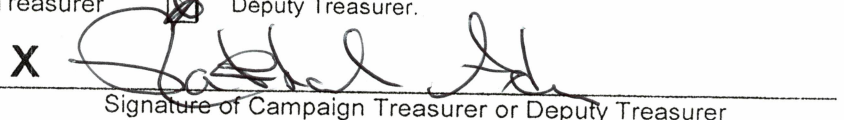
X 

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

I, Nathalie Adams, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

4/10/18  
Date

X   
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

**OFFICE USE ONLY**

2018 APR 10 AM 10:03

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

I, Nathalie Adams,  
candidate for the office of School Board district 4;  
have been provided access to read and understand the requirements of  
Chapter 106, Florida Statutes.

X Nathalie Adams  
Signature of Candidate

4/10/18  
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).