

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

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

(PLEASE PRINT OR TYPE)

2018 MAY 29 PM 12:11

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)

Natalia Garceau

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

300 East Oakland Park Blvd #374  
Oakland Park, FL  
33334

**4. Telephone**

(954 ) 699-7964

**5. E-mail address**

knitalia@gmail.com

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

SCHOOL BOARD, SEAT # 1

**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**

NATALIA GARCEAU

**11. Mailing Address**

1625 JOHNSON STREET

**12. Telephone**

( 954 ) 699-7964

**13. City**

HOLLYWOOD

**14. County**

BROWARD

**15. State**

FL

**16. Zip Code**

33020

**17. E-mail address**

knitalia@gmail.com

**18. I have designated the following bank as my**

Primary Depository     Secondary Depository

**19. Name of Bank**

TD BANK

**20. Address**

1 N STATE ROAD 7

**21. City**

PLANTATION

**22. County**

BROWARD

**23. State**

FLORIDA

**24. Zip Code**

33317

**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**

5-29-18

**26. Signature of Candidate**

*Natalia Garceau*

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

I, NATALIA GARCEAU, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

5-29-18

Date

*Natalia Garceau*

Signature of Campaign Treasurer or Deputy Treasurer

Signature of Candidate: NATALIA GARCEAU  
Date: 10/20/10

Signature of Campaign Treasurer: [Signature]  
Date: 10/20/10

Address of Candidate: 1000 ...

Address of Campaign Treasurer: ...

Address of Ballot Box: ED BANK PLANTATION

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APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CANDIDATE DEPOSITORY FOR CANDIDATE

(PLEASE PRINT NAME)

NOTE: This form must be on file with the election official before any of the candidate's activities.

1. Check appropriate box(es):

2. Name of candidate: NATALIA GARCEAU

3. Name of campaign treasurer: [Name]

4. Name of depository: [Name]

5. Name of candidate for non-chief officer: [Name]

6. Name of candidate for a partisan office: [Name]

7. Name of candidate for a non-partisan office: [Name]

8. Name of candidate for a partisan office: [Name]

9. Name of candidate for a non-partisan office: [Name]

10. Name of candidate for a partisan office: [Name]

11. Name of candidate for a non-partisan office: [Name]

12. Name of candidate for a partisan office: [Name]

13. Name of candidate for a non-partisan office: [Name]

14. Name of candidate for a partisan office: [Name]

15. Name of candidate for a non-partisan office: [Name]

OFFICE ADDRESS

Office:  Party:

Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

Deputy Treasurer: [Name] Party:

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

2018 MAY 29 PM 12:11

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

I, NATALIA GARCEAU ,

candidate for the office of Broward County School Board, Seat # 1 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

Natalia Garceau

Signature of Candidate

5-29-18

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).

OFFICE USE ONLY

STATEMENT OF  
CANDIDATE

(Chapter 106, F.S.)  
(Please print or type)

NATALIA GARCIA

candidate for the office of Broward County School Board Seat #1

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes

*[Handwritten signature]*

*[Handwritten signature]*

X

Date

Signature of Candidate

Each candidate must file a statement with the qualifying officer within 30 days after the  
Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Violation  
of this statute is a first degree misdemeanor and a conviction of the Campaign  
Financing Act which may result in a fine of up to \$1,000 (see 106.19(1)(c), 106.36(4), Florida  
Statutes)