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.

2018 JUN 18 PM 2: 28

BROWARD COUNTY SUPERVISOR OF ELECTIONS

OFFICE USE ONLY

officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	HT-F-507 1 22 87-97 87-97
Initial Filing of Form Re-filing to Change:	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last) Judy Ann Bunce 4. Telephone 5. E-mail address	3. Address (include post office box or street, city, state, zip code) 1041 Meadow Wood Terrace Davie, FL
(954) 554-5839 judybunce @mindsprin	33325
6. Office sought (include district, circuit, group number) Central Broward Water Contro Commissioner ZONE 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 Judy ANN Bunce	
11. Mailing Address	12. Telephone
13. City DAVIE BROWARD F.	(954) 5545839
13. City 14. County 15. Sta	ate 16. Zip Code 17. E-mail address
DAVIE BROWARD F	L 33325 judy bunce @Mindspring.com
18. I have designated the following bank as my	Primary Depository Secondary Depository
19. Name of Bank Wells Fargo	20. Address 8890 W. SR 84
21. City 22. County	23. State 24. Zip Code
DAVIE BrowNED	FL 33325
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ TH DESIGNATION OF CAMPAIGN DEPOSITOR	HE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND BY AND THAT THE FACTS STATED IN IT ARE TRUE.
25. Date	26. Signature of Candidate
6-18-18	X Ludy anx Bunce
27. Treasurer's Acceptance of Appointmen	nt (fill in the blanks and check the appropriate block)
I, Judy ANN Bunce (Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasure	er Deputy Treasurer.
6-18-18 X	Judy ann Bunce
Date	Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

2018 JUN 18 PM 2: 53

BROWARD COUNTY SUPERVISOR OF ELECTIONS

1, Judy AND Sunce	
candidate for the office of counissioner zone	;
have been provided access to read and understand the requirements of	entro of
Chapter 106, Florida Statutes.	
x Judy ann Bure 6-18-18	<u> </u>
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).