## 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

2018 NOV 19 PM 2: 19

BROWARD COUNTY
SUPERVISOR OF ELECTIONS

officer before opening the campaign account.	OFFICE USE ONLY	
1. CHECK APPROPRIATE BOX(ES):		
Initial Filing of Form Re-filing to Change: Tr	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	
Times I Record Witherson	code)	
Jimmy Bernard Witherspoon  4. Telephorle 5. E-mail address	- 2677 NW 9th Street	
(754) 246-5412 brojimmy 2001@ y/g havicin	m Ft. Landerdhe FL 33311	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if	
01.10 12.15	applicable:	
School Board, Dist. 5	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	1	
Samaiyah Williams - St	OKES	
11. Mailing Address 1630 NW 11th Place	12. Telephone	
	(954 515-86ZO)	
13. City 14. County 15. Sta F4. Landender E Bravard F2		
	Primary Depository Secondary Depository	
19. Name of Bank	20, Address	
TD Bank	IN State Road /	
21. City 01 1 L. 22. County	23. State 24. Zip Code	
Plantation Broward	Florida 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	26. Signature of Candidate	
November 19, 2018	X Limms B. Wellenspon	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)		
1, Samaingh Williams - Stoke. (Please Print or Type Name)	, do hereby accept the appointment	
designated above as: Campaign Treasure	er Deputy Treasurer.	
i lodge X		
Date	Signature of Campaigo Treasurer or Deputy Treasurer	
DS-DE 9 (Rev. 10/10)	Rule 15-2.0001, F.A.C.	

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## 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.	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)	Address (include post office box or street, city, state, zip code)	
Junny BERNARD WithERSPOON	71.77 NW 9th St	
4. Telephone 5. E-mail address	Fr. / a Stradle FL 33311	
(754)246-54/2 Bro immy 2001 @yaha.	cup	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if	
Sahoul Board Astrict 5	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		
Jimmy WithELSPOUN	40 Telephone	
11. Mailing Address 2677 July 9th St	12. Telephone (754) 246 5412	
13. City 14. County 15. St	tate 16 7in Code 17 F-mail address	
Ft. Lauderdale Brubard FZ		
18. I have designated the following bank as my Primary Depository Secondary Depository		
19. Name of Bank Bank	20. Address  1 N State Rd 7	
21. City 22. County	23. State 24. Zip Code	
Plantation Braward	F2 333/7	
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	
Movember 19, 2018	X June Hy	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)		
I, (Please Print or Type Name)	, do hereby accept the appointment	
designated above as: Campaign Treasurer Deputy Treasurer.		
11/19/18 X Junio Par		
Date	Signature of Campaign Treasurer or Deputy Treasurer	

## STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

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BROWARD COUNTY SUPERVISOR OF ELECTIONS

1. Jimmy B. Witherspo	on,
	oard, Dist 5;
have been provided access to read and understand	the requirements of
Chapter 106, Florida Statutes.	
x Jimmy B. Witherspan	November 19, 2018
// 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).