

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

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

(PLEASE PRINT OR TYPE)

2019 FEB 27 PM 12:39

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)

NAN H. RICH

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

2748 PINEHURST
WESTON, FL 33332

4. Telephone

(954) 683-1299

5. E-mail address

Senatormanrich@bellsouth.net

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

BROWARD COUNTY COMMISSIONER, DIST. 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 DEMOCRATIC Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

PAUL SALVER

11. Mailing Address

2721 EXECUTIVE PARK DRIVE

12. Telephone

(954) 389-1333

13. City

WESTON

14. County

BROWARD

15. State

FL

16. Zip Code

33331

17. E-mail address

p.salver@psccpas.com

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

19. Name of Bank

CENTENNIAL BANK

20. Address

1504 WESTON ROAD

21. City

WESTON

22. County

BROWARD

23. State

FL

24. Zip Code

33326

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

2/27/19

26. Signature of Candidate

X Nan H. Rich

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

I, PAUL SALVER, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

2/27/19
Date

X

Signature of Campaign Treasurer or Deputy Treasurer

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25. Date

2-27-2019

26. Signature of Candidate

X Nan H. Rich

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

I, NAN H. RICH, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2-27-2019

Date

X Nan H. Rich

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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I, NAN H. RICH,

candidate for the office of BROWARD COUNTY COMMISSIONER, DIST. 1 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X Nan H. Rich
Signature of Candidate

2-27-2019
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).