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

2019 AUG 27 AM 10: 01

BROWARD COUNTY
SUPERFISOR OF ELECTIONS

officer before opening the campaign account.					OFFICE USE ONLY							
1. CHECK APPROPRIATE BOX(ES):												
Initial Filing of Form	Re-	filing to Change:	X T	reasu	urer/De	eputy 🔲	Deposito	ory 🔲	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip							
Narnike Grant				code) 12107 NW 69th Court Parkland FL 33076								
4. Telephone	5. E-ma	il address										
(954) 709-2941	narnike	@hotmail.com	1									
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if							
Broward County School Board District #9				applicable: My intent is to run as a Write-In candidate.								
8. If a candidate for a <u>partisan</u> 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 fo	llowing	person to act as	my	X	Cam	paign Treas	surer	Deput	y Treasure	r		
10. Name of Treasurer or D	eputy Tr	easurer										
Narnike Grant												
11. Mailing Address					12. Tele					phone		
12107 NW 69th Court				(954) 709-2941								
13. City	14. County 15.											
Parkland	Broward FL			33076 narnike@hotmail.com								
18. I have designated the	₹ F	Primary Depository Secondary Depository										
19. Name of Bank				20.	Addre	ess	-	-21				
Bank of America					6101 Coral Ridge dr							
21. City		22. County				23. State			24. Zip C	ode		
Coral Springs		Broward				Florida			33076			
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.	Signa	ture of Can	didate //	/ /	/			
08/26/19				X	Ċ	1/0	m///	L	Tar			
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I, October Grant , do hereby accept the appointment (Please Print or Type Name)								it				
designated above as: Campaign Treasurer Deputy Treasurer.												
	08/26/19 X / Onmile Jon											
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.)

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BROWARD COUNTY

officer before opening the campaign account. **OFFICE USE ONLY** 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: X Treasurer/Deputy Depository Office Partv 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) Narnike Grant 12107 NW 69th Court Parkland FL 33076 4. Telephone 5. E-mail address narnike@hotmail.com (954) 709-2941 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) applicable: Broward County School Board District #9 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 Party candidate. No Party Affiliation Write-In 9. I have appointed the following person to act as my Campaign Treasurer X **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer Renade Grant 12. Telephone 11. Mailing Address 12107 NW 69th Court (954) 536-2394 16. Zip Code 17. E-mail address 13. City 15. State 14. County FL 33076 rngrant@bellsouth.net Parkland Broward **Primary Depository** Secondary Depository X 18. I have designated the following bank as my 20. Address 19. Name of Bank 6101 Coral Ridge dr Bank of America 24. Zip Code 23. State 22. County 21. City Florida 33076 **Broward** Coral Springs 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. 26. Signature of Candidate 25. Date 08/26/19 X ny Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer Deputy Treasurer. designated above as: Warn 08/26/19 Signature of Campaign Treasurer or Deputy Treasurer Date

DS-DE 9 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

Namella Orant

OFFICE USE ONLY

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BROWARD COUNTY

, <u>Narnike Grant</u> ,								
candidate for the office of Broward School Board District 9;								
have been provided access to read and understand the requirements of								
Chapter 106, Florida Statutes.								
X 8ignature of Candidate Bate								
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).