

**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.**

2019 JUN -5 PM 4:22

BROWARD COUNTY
SUPERVISOR OF ELECTIONS

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)

Bamon Joevahn Scott

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

[REDACTED]

4. Telephone

[REDACTED]

5. E-mail address

joevahn@gmail.com

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

**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

Shannon Scott

11. Mailing Address

[REDACTED]

12. Telephone

[REDACTED]

13. City

[REDACTED]

14. County

Broward

15. State

FL

16. Zip Code

[REDACTED]

17. E-mail address

shannonsw2@gmail.com

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

**19. Name of Bank
Bank of America**

**20. Address
6650 N, FL-7**

21. City

Coconut Creek

22. County

Broward

23. State

FL

24. Zip Code

33073

**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

6/5/19

26. Signature of Candidate

X [Signature]

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

I, Shannon Scott, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

6/5/19

Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

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BROWARD COUNTY
SUPERVISOR OF ELECTIONS

I, Bamon Joevahn Scott ,
candidate for the office of Broward Supervisor of Elections ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

6/5/19

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).