

**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 AUG -2 AM 11:00

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)
Debra Hixon

3. Address (include post office box or street, city, state, zip code)
803 N Golf Dr Hollywood, FL 33021

4. Telephone (954) 6585587 **5. E-mail address** debbihixon@gmail.com

6. Office sought (include district, circuit, group number)
Broward County Public Schools At Large Board Member Seat 9

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
Debra Hixon

11. Mailing Address 803 N Golf Dr **12. Telephone** (954) 6585587

13. City Hollywood **14. County** Broward **15. State** FL **16. Zip Code** 33021 **17. E-mail address** debbihixon@gmail.com

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

19. Name of Bank Bright Star Credit Union **20. Address** PO BOX 8966

21. City Ft Lauderdale **22. County** Broward **23. State** FL **24. Zip Code** 33310


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 8/2/19 **26. Signature of Candidate**
 

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

I, Debra Hixon, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

8/2/19 
Date 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, Debra Hixon,

candidate for the office of Broward County Public Schools ;
At-Large Board Member Seat 9

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X Debra Hixon

Signature of Candidate

8/2/19

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).