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

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

(PLEASE PRINT OR TYPE)

2019 SEP -4 PM 2: 18

PROWARD COUNTY

NOTE: This form must be on file with the qualifying officer before opening the campaign account.									OFFICE	USE	ONLY	
1. CHECK APPROPRIATE	BOX(ES	5):										
		filing to Change:	□ T	reasu	urer/D	eputy	Deposito	ry 🔲	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)  3. Address (include post office box or street, city, state, zip												
Patricia Good					code) 9521 SW 6 Street							
4. Telephone	5. E-ma	il address		Pembroke Pines FL 33025								
(954 ) 4308543	Goodfo	orschoolboard	@yaho	00.								
6. Office sought (include of	7. If a candidate for a <u>nonpartisan</u> office, check if											
Broward County School Board District 2					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												
10. Name of Treasurer or Deputy Treasurer												
Patricia Good												
11. Mailing Address	11. Mailing Address 12. Telephone											
9521 SW 6 Street									430854	3		
13. City	City 14. County		15. State		1	Zip Code						
Pembroke Pines	broke Pines Broward FL				Goodforschoolboard@yahoo.com					om		
18. I have designated the	followin	g bank as my	Į	₹ F	Primar	ry Depositor	у 🗆	Seconda	ry Deposit	ory		
70. 14amo 0, Daim						20. Address						
Brightstar Credit Union				12405 Taft Street								
21. City 22. County					23. State			24. Zip Code				
	Pembroke Pines Broward				FL				33028			
UNDER PENALTIES OF PERJUDES	RY, I DECI	LARE THAT I HAVE OF CAMPAIGN DEI	READ TH	Y AND	REGOIN THAT	NG FORM FO	R APPOINTM STATED IN 17	ARE TRUE	MPAIGN TR	EASURE	ER AND	
25. Date 26. Signature of Candidate												
9/4/19 X Alless												
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I, Patricia Good , do hereby accept the appointment (Please Print or Type Name)												
	`	_				Deputy Tre	acurer					
designated above as:	$\times$	Campaign T	reasure	Я		Deputy 11e	1					
9/4/19 X A												
Date	Δ			Sigr	ature	of Campaid	gn Treasur	er or Depu	ıty Treasur	er		

## STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

## **OFFICE USE ONLY**

2019 SEP -4 PM 2: 19

SEPER VISOR OF ELECTIONS

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candidate for the office of <u>Broward County School Board District 2</u>; have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

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).

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