

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

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

(PLEASE PRINT OR TYPE)

2020 MAR -2 PM 2:40

BROWARD COUNTY
SUPERVISOR OF ELECTIONS

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)

Christopher William Pole

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

[REDACTED]

4. Telephone

[REDACTED]

5. E-mail address

[REDACTED]

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

County Court Judge Group 22

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

Christopher William Pole

11. Mailing Address

[REDACTED]

12. Telephone

[REDACTED]

13. City

[REDACTED]

14. County

Broward

15. State

FL

16. Zip Code

[REDACTED]

17. E-mail address

[REDACTED]

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

19. Name of Bank

Iberia Bank

20. Address

1201 South Andrews Ave.

21. City

Fort Lauderdale

22. County

Broward County

23. State

Florida

24. Zip Code

33316

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

March 2, 2020

26. Signature of Candidate



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

I, Christopher William Pole, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

March 2, 2020

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.)

(PLEASE PRINT OR TYPE)

2020 MAR -2 PM 2:43

BROWARD COUNTY
SUPERVISOR OF ELECTIONS

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)

Christopher William Pole

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

4. Telephone

5. E-mail address

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

County Court Judge Group 22

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

Christopher M. Brown

11. Mailing Address

12. Telephone

(954) 764-6828

13. City

14. County

15. State

16. Zip Code

17. E-mail address

Broward

FL

Law_Brown@msn.com

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

19. Name of Bank

Iberia Bank

20. Address

1201 South Andrews Ave.

21. City

22. County

23. State

24. Zip Code

Fort Lauderdale

Broward County

Florida

33316

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

March 2, 2020

26. Signature of Candidate

X

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

I, Christopher M. Brown, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

March 2, 2020

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

2020 MAR -2 PM 2:43

BROWARD COUNTY
SUPERVISOR OF ELECTIONS

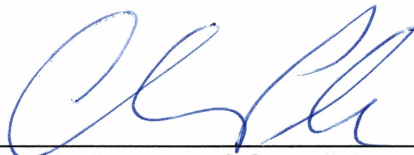
I, Christopher William Pole ,

candidate for the office of County Court Judge Group 22 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



Signature of Candidate

3/2/2020
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).

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

(Section 105.031(5), F.S.)

(Please Type)

OFFICE USE ONLY

2020 MAR -2 PM 2:43

BROWARD COUNTY
SUPERVISOR OF ELECTIONS

I, Christopher William Pole

a judicial candidate, have received, read, and understand the requirements of the Florida Code of Judicial Conduct.



(Signature of candidate)

3/2/2020

(Date)

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.