

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

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

(PLEASE PRINT OR TYPE)

2020 APR 16 AM 10:32

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)**

Allison Gilman

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

440 South Andrews Ave  
Ft. Lauderdale, Florida 33301

**4. Telephone**

(754 ) 422-5745

**5. E-mail address**

agilman@askallison.info

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

Broward County Court Judge,  
Southern, 17th Circuit, 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**

Allison Gilman

**11. Mailing Address**

440 South Andrews Avenue

**12. Telephone**

( 754 ) 422-5745

**13. City**

Ft. Lauderdale

**14. County**

Broward

**15. State**

Florida

**16. Zip Code**

33301

**17. E-mail address**

agilman@askallison.info

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

**19. Name of Bank**

Iberia Bank

**20. Address**

1201 South Andrews Avenue

**21. City**

Ft. Lauderdale

**22. County**

Broward

**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**

04/15/2020

**26. Signature of Candidate**



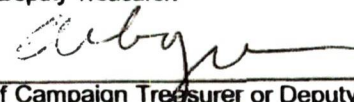
**27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)**

I, Allison Gilman, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

04/15/2020

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. Allison Gilman \_\_\_\_\_ ,

candidate for the office of Broward County Court Judge Grp. 22 ;

have been provided access to read and understand the requirements of  
Chapter 106, Florida Statutes.

X

  
Signature of Candidate

04/15/2020  
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).

