

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2020 JUN -8 AM 11:22

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)

GARRINGTON A ESSUE

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

2401 NW 41ST AVE #403
LAUDERHILL, FL 33313

4. Telephone

(954) 613-6315

5. E-mail address

GARYESSUECAMPAIGN@C
@Gmail.com

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

BROWARD COUNTY COMMISSIONER DISTRICT 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 ☒ 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

GARRINGTON A ESSUE

11. Mailing Address

2401 NW 41ST AVE #403

12. Telephone

(954) 613-6315

13. City

LAUDERHILL

14. County

BROWARD

15. State

FL

16. Zip Code

33313

17. E-mail address

garyessuecampaign@gmail.com

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

19. Name of Bank

BANK OF AMERICA

20. Address

3800 W BROWARD BLVD

21. City

PLANTATION

22. County

BROWARD

23. State

FL

24. Zip Code

33313

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

6/8/2020

26. Signature of Candidate

X 

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

I, Garrington A Essue, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

6/8/2020

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

SUPERVISOR OF ELECTIONS

2020 JUN -8 AM 11:22

I, GARRINGTON ESSUE,

candidate for the office of BROWARD COUNTY COMMISSION DISTRICT 9 ;

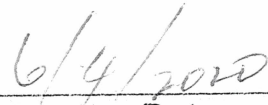
have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



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).