

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2022 JAN -4 AM 8:45

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

AMENDED

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)

Kim Theresa Mollica

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

P.O. BOX 51500
Lighthouse Point, FL
33074

4. Telephone

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5. E-mail address

Reelect Judge
Kim @ gmail.com

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

(Broward) County Court Judge,
17th Judicial Circuit, Group 14

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

Kim Theresa Mollica

11. Mailing Address

P.O. BOX 51500

12. Telephone

() - - - -

13. City

Lighthouse Point

14. County

Broward

15. State

FL

16. Zip Code

33074

17. E-mail address

Reelect Judge Kim @
gmail.com

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

19. Name of Bank

BANK OF AMERICA

20. Address

150 NE. 44th St.

21. City

FORT LAUDERDALE

22. County

Broward

23. State

FL

24. Zip Code

33334

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

1/3/22

26. Signature of Candidate

X

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

I, Kim Theresa Mollica, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1/3/22
Date

X

Signature of Campaign Treasurer or Deputy Treasurer

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

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Kim Theresa Mollica

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P.O. Box 51500
Lighthouse Point, FL
33074

4. Telephone

5. E-mail address

ReelectJudgeKim@gmail.com

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

Broward County Court Judge,
17th Judicial Circuit, Group 14

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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

Debi Alten

11. Mailing Address

P.O. Box 771105

12. Telephone

(954) 214-2599

13. City CORAL SPRINGS **14. County** BROWARD **15. State** FL **16. Zip Code** 33077 **17. E-mail address** ReelectJudgeKim@gmail.com

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

19. Name of Bank

BANK OF AMERICA

20. Address

150 NE 44th St.

21. City FORT LAUDERDALE **22. County** BROWARD **23. State** FL **24. Zip Code** 33334

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25. Date

1/3/22

26. Signature of Candidate

X



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

I, Debi Alten, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1/3/22
Date

X

Signature of Campaign Treasurer or Deputy Treasurer

