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

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying I

2022 MAR -2 AM 9:11 SUPERVISOR OF CLEVISONS

officer before opening the campaign account.	Howarded	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):		
☐ Initial Filing of Form Re-filing to Change: ☐ Tree	easurer/Deputy Depository	☐ Office ☐ Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box	or street, city, state, zip
Brenda tam	code) 23505.W.106	
4. Telephone 5. E-mail address	Davie FL 33	5a4
(954) 478-3735 Fam 4School Board Quicloud.com		
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>non</u>	partisan office, check if
School Board District 6	applicable: ☐ My intent is to r	run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> 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		
11. Mailing Address	i-a/p	2. Telephone
1376/ N. Garden Cove Circle (954) 937-5490		
13. City 14. County 15. Star	te 16. Zip Code 17. E-mail addr 333355 Elain e 33	ress Dala yahoo.com
18. I have designated the following bank as my Primary Depository Secondary Depository		
19. Name of Bank 20. Address 8890 W. S.R. 84		
21. City 22. County ,	23. State	24. Zip Code
Davie Boward	FL	33324
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	26. Signature of Candidate	
3/1/22	x Brenda Ta	M
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)		
I, \(\mu \cdot \c		
designated above as: Campaign Treasurer. Deputy Treasurer.		
3/1/2022 X green		
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)

2022 MAR -2 AM 9: 11



NOTE: This form must be on file with the qualifying officer before opening the campaign account.	Hwended 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) 4. Telephone 5. E-mail address	3. Address (include post office box or street, city, state, zip code) 2350 S.W. 106 LLQY DOUL FL 33324	
(954) 478-3735 Fam4SchoolBoardolicloud.com		
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if		
Broward County School Board DISTRICT 6 applicable: My intent is to run as a Write-In candidate.		
8. If a candidate for a <u>partisan</u> 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		
11. Mailing Address 12. Telephone 12. Teleph		
13. City 14. County 15. State 16. Zip Code 17. E-mail address 17. E-mail address 18. City 19. County 19. Code 19. E-mail address 19. Code 19. E-mail address 19. Code 19.		
18. I have designated the following bank as my Primary Depository Secondary Depository		
19. Name of Bank Well's Forgo 20. Address 8890 W.S.R84		
21. City Broward	23. State 24. Zip Code 333324	
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 3 1 22 X Denote Term 26. Signature of Candidate X Denote Term		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)		
I,, do hereby accept the appointment (Please Print or Type Name)		
designated above as: Campaign Treasurer. Deputy Treasurer.		
3// Date X Dim Od Tom Signature of Campaign Treasurer or Deputy Treasurer		