

**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  
officer before opening the campaign account.**

2022 JUN 14 PM 1:22

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS  
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)

Lance Fein

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

4650 SW 61st Ave  
Davie, FL 33314

**4. Telephone**

(954 ) 581 8222

**5. E-mail address**

Lance@gibe.com

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

PAID - Commissioner

**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**

Michelle Fein

**11. Mailing Address**

12100 NW 23rd Court

**12. Telephone**

( 954 ) 608 9338

**13. City**

Plantation

**14. County**

Broward

**15. State**

FL

**16. Zip Code**

33323

**17. E-mail address**

mommyfein@gmail.com

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

**19. Name of Bank**

Valley National Bank

**20. Address**

One N Federal Highway

**21. City**

Boca Raton

**22. County**

Palm Beach

**23. State**

FL

**24. Zip Code**

33432

**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**

05/09/2022

**26. Signature of Candidate**

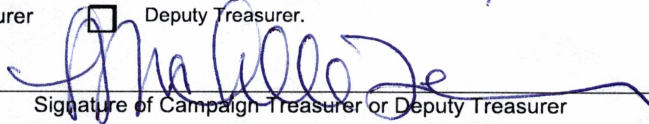
X 

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

I, Michelle Jo Fein, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

05-22-2022  
Date

X   
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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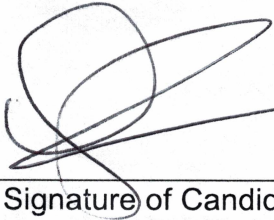
BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

I, Lance Fein ,

candidate for the office of PAID Commissioner ;

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

X



Signature of Candidate

6/1/2022

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).