APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

2023 OCT -2 PM 4: 09

BROWARD COUNTY SUPERVISOR OF ELECTIONS

NOTE: This form must officer before opening th	be on fil e campa	le with the qua ign account.	alifying \	Have	asan			OFFIC	E USE ONLY	
1. CHECK APPROPRIATI	•			,,		Z		0.55		
☐ Initial Filing of Form Re-filing to Change: ☑ Treasurer/Deputy ☑ Depository ☐ Office ☐ Party										
2. Name of Candidate (in	3. Add code)		le post office bo	x or st	reet, city,	state, zip				
Tamar Hamilton				7401	7401 Wiles Road					
4. Telephone	5. E-ma	il address		Suite		El 00007				
(954)2637908	tamar@tamarhamiltonalaw.com Coral Springs, FL, 33067									
6. Office sought (include district, circuit, group number) 17th Circuit, Broward County, County Court Judge. Group 25					7. If a candidate for a <u>nonpartisan</u> 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 ☐										
9. I have appointed the following person to act as my										
10. Name of Treasurer or Deputy Treasurer Kerrina O'Connor										
11. Mailing Address 7401 Wiles Road Suite 325					12. Telephone (954) 361-9292					
13. City										
Coral Springs Broward FL 33067 contact@kakefinancialservices.com										
18. I have designated the following bank as my 🔀 Primary Depository 🗌 Secondary Depository										
					20. Address 5321 Lyons Rd					
21. City		22. County			23. State			24. Zip (
Coconut Creek		Broward			Florida	l		33073		
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. Sigr	26. Signature of Candidate								
10/02/2023					X					
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:										
10/02/2023			X	/X// Cler						
Date			l	Signature of Campaign Treasurer or Deputy Treasurer						