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.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
<u> </u>	asurer/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
Teniadé Broughton	code) 413 FAIRFAX DENC
4. Telephone 5. D-mail address	Pensacda, FL 32503
404 12770132 Inforteniade com	"Macda, FL 3250.3
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
	applicable:
District 5 City Council	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	
10. Name of Treasurer or Deputy Treasurer	
Teniade Broughton	
11. Mailing Address	12. Telephone
913 FAIRFAX DR	. (404)2710132
13. City 14. County 15. State	e 16. Zip Code 17. E-mail address
Prusueda Escandia FL	32503 infortenique.com
18. I have designated the following bank as my Primary Depository	
19. Name of Bank 20. Address	
Central Credit Union of Fleride	1964 Bayas Blud
21. City Credit Union of Floride 22. County	23. State 24. Zip Code
Prusada Escandia	_ FL 32503
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 2	6. Signature of Candidate
4/29/2020	Claring Brown
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
(Please Print or Type Name), do hereby accept the appointment	
designated above as:	
4/29/2020 X	5 B
	ignature of Campaign Treasurer or Deputy Treasurer