

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2020 JUN -4 PM 1:09

PALM BEACH COUNTY, FL

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

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) Robin Rance-Hoffman		3. Address (include post office box or street, city, state, zip code) 1607 16th Terrace Palm Beach Gardens, FL 33418
4. Telephone (561) 317-3542	5. E-mail address robinrance20@gmail.com	

6. Office sought (include district, circuit, group number) Port of Palm Beach District, Group 2	7. If a candidate for a nonpartisan office, check if applicable: <input checked="" type="checkbox"/> 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
Robin Rance-Hoffman

11. Mailing Address 1607 16th Terrace	12. Telephone (561) 317-3542
--	-----------------------------------

13. City Palm Beach Gardens	14. County Palm Beach	15. State FL	16. Zip Code 33418	17. E-mail address robinrance20@gmail.com
--------------------------------	--------------------------	-----------------	-----------------------	--

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

19. Name of Bank TD Bank		20. Address 316 Northlake Boulevard	
21. City North Palm Beach	22. County Palm Beach	23. State FL	24. Zip Code 33408

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 June 4, 2020	26. Signature of Candidate <input checked="" type="checkbox"/> <i>Robin Rance-Hoffman</i>
--------------------------	--

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

I, Robin Rance-Hoffman, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

June 4, 2020 *Robin Rance-Hoffman*
Date Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

SUPERVISOR OF ELECTIONS

2020 JUN -4 PM 1:09

PALM BEACH COUNTY, FL

I, Robin Rance-Hoffman ,

candidate for the office of Port of Palm Beach District, Group 2 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X Robin Rance-Hoffman

Signature of Candidate

June 4, 2020

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).