

**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 11 PM 4:56
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)

Betty Josephine Argue

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

16886 West Alan Black Blvd,
Loxahatchee, FL 33470

4. Telephone

(561) 345-0110

5. E-mail address

bettyargue.alerts@gmail.com

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

Indian Trail Improvement District, Seat 4

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

Betty Josephine Argue

11. Mailing Address

16886 West Alan Black Blvd.,

12. Telephone

(561) 345-0110

13. City

Loxahatchee

14. County

Palm Beach

15. State

FL

16. Zip Code

33470

17. E-mail address

bettyargue.alerts@gmail.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

SunTrust

20. Address

9951 Okeechobee Blvd.

21. City

West Palm Beach

22. County

Palm Beach

23. State

FL

24. Zip Code

33411

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

6/11/2020

26. Signature of Candidate

X

Betty Argue

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

I, Betty Argue, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

6/11/2020

Date

X

Betty Argue

Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

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SUPERVISOR OF ELECTIONS

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PALM BEACH COUNTY, FL

I, Betty Josephine Argue, "Betty Argue" ,
candidate for the office of Indian Trail Improvement District, Seat 4 ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Betty Argue
Signature of Candidate

6/11/2020
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).