

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2021 APR 20 PM 12:06

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)

Michelle Oyola McGovern

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

9200 Belvedere Road, Suite 102
Royal Palm Beach, FL 33411

4. Telephone

(561) 820-7484

5. E-mail address

votemichellemcgovern@gmail.com

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

Palm Beach County Commission, District 6

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 ☒ Democratic Party candidate.

9. I have appointed the following person to act as my ☒ Campaign Treasurer ☐ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Kim LeeBove

11. Mailing Address

9200 Belvedere Rd, Suite 202

12. Telephone

(561) 689-9787

13. City

West Palm Beach

14. County

Palm Beach

15. State

FL

16. Zip Code

33411

17. E-mail address

kim.leebove@gmail.com

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

19. Name of Bank

Wells Fargo

20. Address

5849 Okeechobee Boulevard

21. City

West Palm Beach

22. County

Palm Beach

23. State

FL

24. Zip Code

33417

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

4/20/2021

26. Signature of Candidate

X 


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

I, Kim LeeBove, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

4/20/21

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

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10. Name of Treasurer or Deputy Treasurer

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14. County

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25. Date

4/20/2021

26. Signature of Candidate

X 

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

I, Michelle Oyola McGovern, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

4/20/2021

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

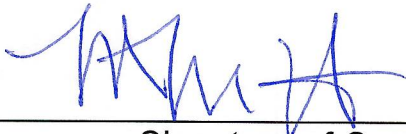
(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY
SUPERVISOR OF ELECTIONS
2021 APR 20 PM 12:06
PALM BEACH COUNTY, FL.

I, Michelle Oyola McGovern,
candidate for the office of Palm Beach County Commission, District 6 ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate



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).