## 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 filing officer before

2024 MAY 31 PM 1: 25

OFFICE USE ONLY

opening the campaign account.							SFI ICE OSE CIVET		
1. CHECK APPROPRIATE BOX	((ES):								
■ Initial Filing of Form □ Re-	-filing to Change:	Treasur	•		ository	☐ Office			
2. Name of Candidate (in this order: First, Middle, Last):			3. Address (include PO Box or Street, City, State, Zip Code):						
(Please Print or Type Name)  Bobby Powell, Jr.			6901 Okeechobee Blvd., Suite D5-L65 West Palm Beach, FL 33411						
bobby i owell, si.			West Pain Beach, FL 33411						
				0 5 '! 4 .!					
4. Telephone:	5. Candidate's Voter 105137952	Registra	tion #:	6. Email Add		II <i>C</i>	المواجعة المحسود		
(561 ) 689-9787	(not required for qualify					_	ngmail.com		
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:									
Palm Beach County Commission, District / 🔲 i intend to run as a Write-In Candidate.									
9. If a candidate for <u>partisan</u> office, check the box and fill in the name of the party as applicable: I intend to run as a									
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ■ Democrat Party candidate.									
10. I have appointed the following person to act as my:   Campaign Treasurer  Deputy Treasurer									
11. Name of Treasurer or Dep	outy Treasurer:		12. Telephone: 13. Email Add			Address:			
Bobby Powell, Jr.			votebobbypowell@gmail.com						
14. Mailing Address:		15. Cit	v:		16. St	ate:	17. Zip Code:		
6901 Okeechobee Blvd., Suite D5-L65 West						33411			
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository									
19. Name of Bank:			20. Address:						
Wells Fargo			4567 Community Drive						
		22. Co	Beach		23. State:		24. Zip Code: 33417		
770011 0 200.0			READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE						
CAMPAIGN TREASURER AND	DESIGNATION OF THE C	AMPAIG	N DEPO	SITORY AND I	HAI IH	E FACIS STA	TED IN IT ARE TRUE.		
25 Detai ( ) 2 / ) 2 /		26. Signature of Candidate:							
25. Date: 5/31/24			X	1941	5				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)									
I, Bobby Powell, Jrdo hereby accept the appointment designated above as: (Please Print or Type Name)									
☐ Campaign Treasurer. ☐ Deputy Treasurer. ☐ Deputy Treasurer.									
28. Date: 5/31/24				29. Signature of Campaign Treasurer or Deputy Treasurer					
DS-DF 9 (Rev. 09/23)			/ / Rule 1S-2.0001, F.A.C.						

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

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

(PLEASE PRINT OR TYPE)

Saled Control of the 2024 MAY 31 PM 1:25

NOTE: This form must be on file with the filing officer before opening the campaign account.				128 mg × 44	: 1 = 151	Milliana (	OFFICE USE ONLY			
1. CHECK APPROPRIATE BOX(ES):										
	-filing to Change:	Treasur			ository	Office				
2. Name of Candidate (in this order: First, Middle, Last):  (Please Print or Type Name)			3. Address (include PO Box or Street, City, State, Zip Code): 6901 Okeechobee Blvd., Suite D5-L65							
Bobby Powell, Jr.			West Palm Beach, FL 33411							
4. Telephone:	5. Candidate's Voter Registration #: 6. Email Address:									
(561 ) 689-9787		oot required for qualifying purposes)								
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:										
Palm Beach County Commission, District / 📋 i intend to run as a Write-In Candidate.										
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a										
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐ Democrat Party candidate.										
10. I have appointed the following person to act as my:   Campaign Treasurer   Deputy Treasurer										
11. Name of Treasurer or Deputy Treasurer:			12. Telephone: 13. Email Address:							
Kim LeeBove			kim@csteam360.com							
14. Mailing Address:		15. Cit	•	Reach	16. State: FL		33411			
9200 Belvedere Rd, Suite 202 West Palm Beach   FL   33411  18. I have designated the following bank as my (check appropriate box):  Primary Depository  Secondary Depository										
19. Name of Bank:				20. Address:						
Wells Fargo			4567 Community Drive							
21. City:	22. Co	-		23. State:		24. Zip Code:				
1100t   aiiii 20aoii			Ilm Beach		FL		33417			
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.										
			26. Signature of Candidate:							
25. Date: 5/31/24	X ///////									
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)										
Kim LeeBovedo hereby accept the appointment designated above as:										
(Please Print or Type Name)										
■ Campaign Treasurer. □ Deputy Treasurer.										
28. Date: 5/31/24  29. Signature of Campaign Treasurer or Deputy Tre						or Deputy Treasurer				
DS-DE 9 (Rev. 09/23) Rule 1S-2.0001, F.A.C.										