

**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):**  
 Initial Filing of Form    Re-filing to Change:  Treasurer/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 code)  
 Amy, Lynn, Rosen    5247 SW 120 Avenue  
 Cooper City, FL 33330

**4. Telephone**    **5. E-mail address**  
 (954) 260-0011    AmyRosen2020@gmail.com

**6. Office sought** (include district, circuit, group number)    **7. If a candidate for a nonpartisan office, check if applicable:**  
 Commissioner, District 4     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.

I have appointed the following person to act as my  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**  
 Amy Rosen

**11. Mailing Address**    **12. Telephone**  
 5247 SW 120 Ave.    (954) 260-0011

**13. City**    **14. County**    **15. State**    **16. Zip Code**    **17. E-mail address**  
 Cooper City    Broward    FL    33330    AmyRosen2020@gmail.com

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

**19. Name of Bank**    **20. Address**  
 Valley Bank    1 SW 129 Ave, Suite 100

**21. City**    **22. County**    **23. State**    **24. Zip Code**  
 Pembroke Pines    Broward    FL    33027

**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**    **26. Signature of Candidate**  
 6/2/20    X [Signature]

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
 I, Amy Rosen, do hereby accept the appointment  
 (Please Print or Type Name)

Signed above as:  Campaign Treasurer     Deputy Treasurer.  
6/2/2020    X [Signature]  
 Date    Signature of Campaign Treasurer or Deputy Treasurer