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.								OFFICI	USE	ONLY	
1. CHECK APPROPRIATE BOX(ES):											
✓ Initial Filing of Form	Re	filing to Change:	☐ Tre	asurer	/Deputy	Deposit	ory 🔲	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip						
Mike Lambrechts					code)						
4. Telephone	5. E-mail address			1630 SW 33rd Court Fort Lauderdale, FL 33315							
(954) 830-0133	mike@	mikelambrech	ts.com								
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if						
City of Fort Lauderdale District 4 Commissioner					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 Affi	liation					Pa	irty cand	didate.		
9. I have appointed the following person to act as my											
10. Name of Treasurer or Deputy Treasurer											
Geoff Arias											
11. Mailing Address					12. Telephone						
3480 Buchanan Street (954) 815-7674								74			
13. City	14. County		15. State		6. Zip Code 17. E-mail addres		ail address	s			
Hollywood	Broward		FL	33	3021	geoff@lombardidev.com					
18. I have designated the following bank as my					Primary Depository Secondary Depository						
19. Name of Bank 20. Address											
First National Bank Coastal Community					2800 E Oakland Park Blvd. Suite 100						
21. City		22. County			23. State			24. Zip C	ode		
Fort Lauderdale	100 mm 1 mm	Broward			FL			33306			
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											
6/15/2022				x \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I, Gootfry Hrias (Please Print or Type Name)				, do hereby accept the appointment							
designated above as: Campaign Treasurer peputy Treasurer.											
6/15/2022 X Left O											
Date			/ 5	Signature of Campaign Treasurer or Deputy Treasurer							