

2023 OCT 16 PM 12:07

CITY CLERK'S OFFICE

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):
[X] Initial Filing of Form Re-filing to Change: [ ] Treasurer/Deputy [ ] Depository [ ] Office [ ] Party

2. Name of Candidate (in this order: First, Middle, Last) DEAN J. TRANTALIS
3. Address (include post office box or street, city, state, zip code) 1430 NE 18TH AVENUE FT. LAUDERDALE, FL 33304
4. Telephone (954-) 295-2838
5. E-mail address dean@trantalis.com

6. Office sought (include district, circuit, group number) MAYOR-FT. LAUDERDALE
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 [X] Campaign Treasurer [ ] Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer JACQUELYNE SCOTT

11. Mailing Address 1626 SE 1st Street
12. Telephone ( )

13. City Ft. Lauderdale
14. County Broward
15. State FL
16. Zip Code 33301
17. E-mail address Jackie@jackiescott.net

18. I have designated the following bank as my [X] Primary Depository [ ] Secondary Depository

19. Name of Bank BANK UNITED
20. Address 2723 North Dixie Hwy.

21. City WILTON MANORS
22. County BROWARD
23. State FLORIDA
24. Zip Code 33334

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 10/16/23
26. Signature of Candidate [Handwritten Signature]

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)
I, JACQUELYNE SCOTT, do hereby accept the appointment
(Please Print or Type Name)
designated above as: [X] Campaign Treasurer. [ ] Deputy Treasurer.
10-16-23 Date [Handwritten Signature] Signature of Campaign Treasurer or Deputy Treasurer