

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

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

(PLEASE PRINT OR TYPE)

CITY OF FORT LAUDERDALE

2024 NOV -6 PM 4:05

CITY CLERK'S OFFICE

OFFICE USE ONLY

NOTE: This form must be on file with the filing officer before opening the campaign account.

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):
(Please Print or Type Name)

Barbra Anne Stern

3. Address (include PO Box or Street, City, State, Zip Code):
1929 NE 15 Avenue, Fort Lauderdale, FL 33305

4. Telephone:

(954) 612-3988

5. Candidate's Voter Registration #:

101863190
(not required for qualifying purposes)

6. Email Address:

basternesq@gmail.com

7. Office Sought (include district, circuit, group, or seat #):

Mayor of Fort Lauderdale

8. If a candidate for a nonpartisan office, check the box if applicable:

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. _____ Party candidate.

10. I have appointed the following person to act as my:

Campaign Treasurer

Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Barbra Stern

12. Telephone:

(954) 612-3988

13. Email Address:

basternesq@gmail.com

14. Mailing Address:

1929 NE 15 Avenue

15. City:

Fort Lauderdale

16. State:

FL

17. Zip Code:

33305

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

Valley Bank

20. Address:

350 E. Las Olas Blvd

21. City:

Fort Lauderdale

22. County:

Broward

23. State:

FL

24. Zip Code:

33301

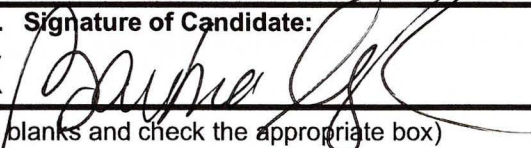
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

11/4/24

26. Signature of Candidate:

X



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

I, Barbra Anne Stern

(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

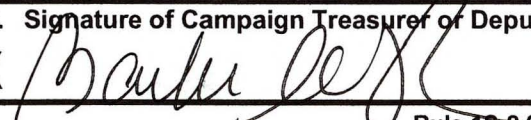
Deputy Treasurer.

28. Date:

11/4/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X



**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY
CITY OF FORT LAUDERDALE

2024 NOV -6 PM 4:05

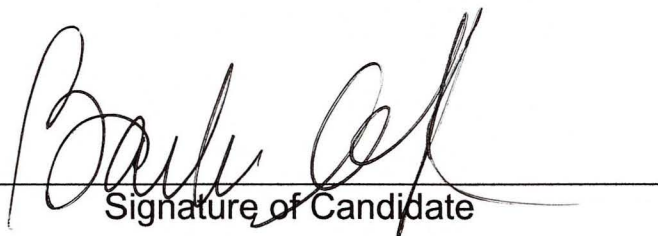
CITY CLERK'S OFFICE

I, Barbra Anne Stern ,

candidate for the office of Mayor of Fort Lauderdale ;

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).