

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

CITY OF FORT LAUDERDALE

2023 NOV -3 PM 12:06

CITY CLERK'S OFFICE

(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)

Kevin Vincent Cochran

3. Address (include post office box or street, city, state, zip code)

2100 S. Ocean Lane #311
Fort Lauderdale FL 33316

4. Telephone

(954) 995 3747

5. E-mail address

kevin.cochran@fl@gmail.com

6. Office sought (include district, circuit, group number)

Fort Lauderdale City Commission District 4

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

Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Kevin Cochran

11. Mailing Address

2100 S. Ocean Lane #311 Fort Lauderdale FL 33316

12. Telephone

(954) 995 3747

13. City

Fort Lauderdale

14. County

Broward

15. State

FL

16. Zip Code

33316

17. E-mail address

kevin.cochran@fl@gmail.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Seacoast Bank

20. Address

12 SE 7th St Unit 100

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 APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

11-3-23

26. Signature of Candidate

X *Kevin Cochran*

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

I, Kevin Cochran, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

Date 11-3-23

X *Kevin Cochran*
Signature of Campaign Treasurer or Deputy Treasurer