## 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 filing officer before opening the campaign account.

CITY OF FORT LAUDERDALE

2024 JUN 14 AM 9: 26

CITY CLERK'S OFF OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):							
■ Initial Filing of Form □ Re-filing to Change:	Treasur	er/Deput	y 🗆 Dep	ository	Office	e 🛘 Party	
2. Name of Candidate (in this order: First, Middle, Last):  3. Address (include PO Box or Street, City, State, Zip Code):							
(Please Print or Type Name)  Barbra Anne Stern  1929 NE 15th Ave Fort Lauderdale, FL 33305							
Darbia / Amio Otom	Fort Lauderdale, 1 L 33303						
			,				
4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address:							
954 ) 612-3988 101863190 (not required for qualifying purpose			·				
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:							
Fort Lauderdale Mayor							
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:			12. Telephone:			13. Email Address:	
Stephen McWilliam (954 )325-6771 sbmcwilliam@gma						am@gmail.com	
14. Mailing Address:	15. Cit	•		16. St	ate:	17. Zip Code:	
1512 E Broward Blvd #204A Ft Lau		derdale F		FL		33301	
18. I have designated the following bank as my (check appropriate box): 🔳 Primary Depository 🗌 Secondary Depository							
19. Name of Bank:			20. Address:				
/alley National Bank 301 E Las Olas Blvd. Suite 101 21. City: 22. County: 23. State: 24. Zip Code:							
Fort Lauderdale	Browa	1		i l		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.							
26. Signature of Candidate.							
25. Date: (1/4/2024) X Mille II							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)							
I, STEPM M WIWIAMdo hereby accept the appointment designated above as:							
Campaign Treasurer. Deputy Treasurer.							
28. Date: 6/14/2024		29. S	gnature of C	ampaig	n Treasurer	or Deputy Treasurer	
DS-DE 9 (Ray 09/23)					D.	Je 1S-2 0001 E A C	