

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

CITY OF HALLANDALE
CITY CLERK

14 JUN 19 PM 12:03

(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)

Gerald Edwin Dean

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

726 NW 1st COURT
Hallandale Bch., FL 33009

4. Telephone

(954) 881-2160

5. E-mail address

gedean54@hotmail.com

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

City Commissioner, Seat 1

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

Gerald E. Dean

11. Mailing Address

726 NW 1st CT, Hallandale Bch, FL

12. Telephone

(954) 881-2160

13. City

Hallandale Bch

14. County

Broward

15. State

FL

16. Zip Code

33009

17. E-mail address

gedean54@hotmail.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Bank of America

20. Address

16350 Pines Boulevard

21. City

Pembroke Pines

22. County

Broward

23. State

FL

24. Zip Code

33027

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

June 19, 2014

26. Signature of Candidate

X Gerald E. Dean

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

I, Gerald E. Dean, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

June 19, 2014
Date

X Gerald E. Dean
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY
CITY OF HALLANDALE
CITY CLERK

14 JUN 19 PM 12:03

I, Gerald E. Dean,

candidate for the office of City Commissioner, Seat 1;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X Gerald E. Dean

Signature of Candidate

June 05, 2014
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).

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

CITY OF HALLANDALE
CITY CLERK

14 JUN 19 PM 12:03

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, Gerald E. Dean

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of City Commissioner, _____,

_____ (office) _____ (district #)
Seat 1; I am a qualified elector of Broward County, Florida;
(circuit #) (group or seat #)

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

X Gerald E. Dean (954) 881-2160 gedean54@hotmail.com
Signature of Candidate Telephone Number Email Address

726 NW 1st Ct, Hallandale Bch, Fl. 33009
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 101258352

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

Je - rald Deen

STATE OF FLORIDA

COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 19th day of June, 2014.

Personally Known: _____ or

Produced Identification: DH

Type of Identification Produced: Drivers License

[Signature]
Signature of Notary Public

Print, Type or Stamp Commissioned Name of Notary Public

