

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

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

(PLEASE PRINT OR TYPE)

05-24-12P04:27 RCV



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)

Mark Howard Sierens

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

6890 SW 57th St Davie FL 33314

4. Telephone

(954) 292-8932

5. E-mail address

mark@housephoenix.com

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

Town of Davie District 2 city Council

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

Mark Howard Sierens

11. Mailing Address

6890 SW 57th St

12. Telephone

(954) 292-8932

13. City

Davie

14. County

Broward

15. State

FL

16. Zip Code

33314

17. E-mail address

Mark@HousePhoenix.com

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

19. Name of Bank

Chase

20. Address

6529 Nova Dr

21. City

Davie

22. County

Broward

23. State

FL

24. Zip Code

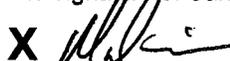
33314

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

5/24/12

26. Signature of Candidate

X 

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

I, Mark Sierens, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

5/24/12

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

05-24-12P04:27 RC *Jan*

I, Mark Sierens,
candidate for the office of Town Council District 2;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X *[Signature]*
Signature of Candidate

5/24/12
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).