

**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 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)

Randall Ross Fernandez

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

8191 NW 8th Manor
Plantation, FL, 33324

4. Telephone

(954) 551-5675

5. E-mail address

Randall891@gmail.com

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

City Council Group 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

Randall Ross Fernandez

11. Mailing Address

8191 NW 8th Manor

12. Telephone

(954) 551-5675

13. City

Plantation

14. County

Broward

15. State

FL

16. Zip Code

33324

17. E-mail address

Randall891@gmail.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

PNC Bank

20. Address

3 university dr

21. City

Davie

22. County

Broward

23. State

FL

24. Zip Code

33324

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

12-8-17

26. Signature of Candidate

X

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

I, Randall Ross Fernandez, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

12-14-17
Date

X
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY



I, Russell Ross Fernandez,

candidate for the office of City Council Group 1;

have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

X 
Signature of Candidate

12-8-17
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).



CITY OF PLANTATION, FLORIDA
MUNICIPAL ELECTION
SUPPLEMENTAL CHARTER QUALIFICATION AFFIDAVIT

STATE OF FLORIDA
COUNTY OF BROWARD

BEFORE ME, THE UNDERSIGNED AUTHORITY, PERSONALLY APPEARED,
(Randall Ross Fernandes) (name of candidate), who, having been duly
sworn, deposes and states as follows:

1. My name is Randall Ross Fernandes (name of candidate) and I am of sound mind and age to make this Affidavit.
2. I possess the requisite qualifications under the Charter of Plantation to seek election on November, 6th, 2018 (date of election) to the elected office of Member of the City Council ("Mayor" or "Member of the City Council").
3. I have been a legal resident of the City of Plantation for the one year period preceding June 18th 2018 (first day of Qualifying Period) which is opening of the qualifying period for the election scheduled on June, 18th, 2018 (date of election). This means that for at least such one year period, my permanent home has been in the City of Plantation.
4. I swear that all herein is true to my personal knowledge.

FURTHER AFFIANT SAYETH NAUGHT.

Signature of Candidate

8191 NW 80th Manor Plantation, FL, 33324
Home Address

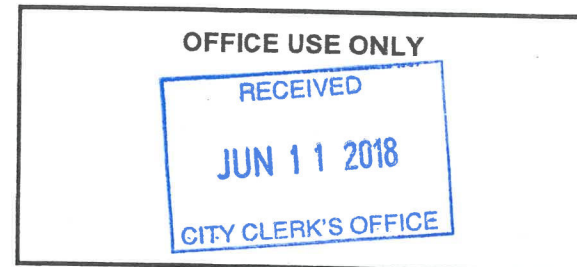
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Randall Fernandez
Name

(2) 1891 NW 8th Manor
Address (number and street)

Plantation FL 33315
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Council Seat 1

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 5 / 1 / 18 To 5 / 31 / 18 Report Type: 2018 MS

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . ⁰⁰

Loans \$ _____, _____, 0 . ⁰⁰

Total Monetary \$ _____, _____, 0 . ⁰⁰

In-Kind \$ _____, _____, 0 . ⁰⁰

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 25 . ⁰⁰

Transfers to Office Account \$ _____, _____, 0 . ⁰⁰

Total Monetary \$ _____, _____, 0 . ⁰⁰

Total Monetary \$ _____, _____, 0 . ⁰⁰

(8) Other Distributions

\$ _____, _____, 0 . ⁰⁰

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 300 . ⁰⁰

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 25 . ⁰⁰

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Randall Fernandez

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

[Signature]
Signature

(Type name) Randall Fernandez

Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ronald Fernandes

(2) I.D. Number _____

(3) Cover Period 5 / 1 / 18 through 5 / 31 / 18

(4) Page 1 of 1

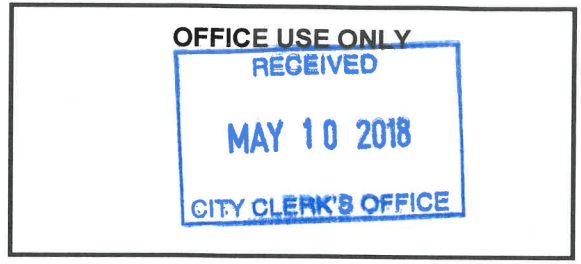
(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
5/16/18	PNC Bank	Bank Fee	Bank Fee		25.00
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Randall Fernandes
 Name

(2) 8191 NW 8th Manor
 Address (number and street)

Plantation FL 33324
 City, State, Zip Code



Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City Council Seat 1

Political Committee (PC)

Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded

Party Executive Committee (PTY) Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 4 / 1 / 18 To 4 / 30 / 18 Report Type: 2018 m4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 25 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 300 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 50 . 00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Randall Fernandes

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

[Signature]
 Signature

(Type name) Randall Fernandes

Candidate Chairperson (only for PC and PTY)

[Signature]
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Randall Fernandes

(2) I.D. Number _____

(3) Cover Period 4 / 1 / 18 through 4 / 30 / 18

(4) Page 1 of 1

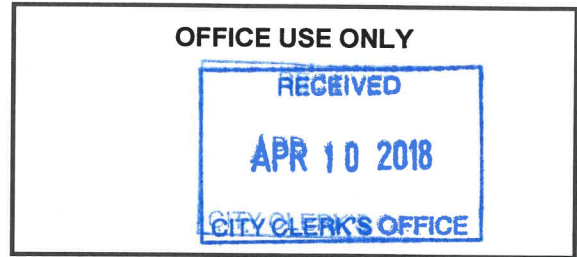
(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
4/10/18	PNC Bank	Nh	Bank Fee		25. ⁰⁰
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Randall Fernandes
Name

(2) 8191 NW 8th Manor
Address (number and street)

Plantation, FL, 33324
City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- | | | |
|--|----------------------|--|
| <input checked="" type="checkbox"/> Candidate | Office Sought: _____ | <input type="checkbox"/> Check here if PC or ECO has disbanded |
| <input type="checkbox"/> Political Committee (PC) | | <input type="checkbox"/> Check here if PTY has disbanded |
| <input type="checkbox"/> Electioneering Communications Org. (ECO) | | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input type="checkbox"/> Party Executive Committee (PTY) | | |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | | |

(5) Report Identifiers

Cover Period: From 3 / 1 / 18 To 3 / 31 / 18 Report Type: M20183

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$	____	,	____	,	<u>0</u>	.	____
Loans	\$	____	,	____	,	<u>0</u>	.	____
Total Monetary	\$	____	,	____	,	<u>0</u>	.	____
In-Kind	\$	____	,	____	,	<u>0</u>	.	____

(7) Expenditures This Report

Monetary Expenditures	\$	____	,	____	,	<u>25</u>	.	____
Transfers to Office Account	\$	____	,	____	,	____	.	____
Total Monetary	\$	____	,	____	,	<u>25</u>	.	____

(8) Other Distributions

\$ ____ , ____ , 0 . ____

(9) TOTAL Monetary Contributions To Date

\$ ____ , ____ , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ ____ , ____ , 25 . ____

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Randall Fernandes

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

[Signature]

X _____
Signature

(Type name) Rull Ferns

Candidate Chairperson (only for PC and PTY)

[Signature]

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Randall Fernandes

(2) I.D. Number _____

(3) Cover Period 3 / 1 / 18 through 3 / 31 / 18

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
3 / 15 / 18	PNC Bank	n/a	Bank Fee		25. ⁰⁰
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Randall Ross Fernandes
Name

(2) 8191 NW 8th Manor
Address (number and street)

Plantation, FL, 33324
City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Council, Seat 1

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 2 / 1 / 18 To 2 / 28 / 18 Report Type: 2018M2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . _____⁰⁰

Loans \$ _____, _____, 0 . _____⁰⁰

Total Monetary \$ _____, _____, 0 . _____⁰⁰

In-Kind \$ _____, _____, 0 . _____⁰⁰

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0 . _____⁰⁰

Transfers to Office Account \$ _____, _____, 0 . _____⁰⁰

Total Monetary \$ _____, _____, 0 . _____⁰⁰

(8) Other Distributions

\$ _____, _____, 0 . _____⁰⁰

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 300 . _____⁰⁰

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0 . _____⁰⁰

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Randall Fernandes

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X [Signature]
Signature

(Type name) Randall Fernandes

Candidate Chairperson (only for PC and PTY)

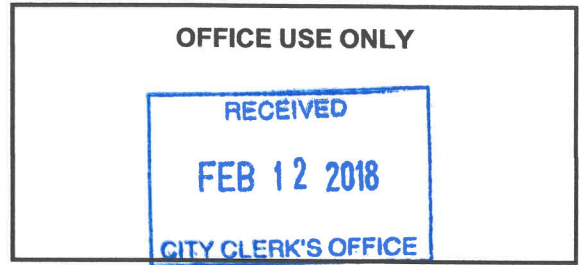
X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Randall Fernandes
Name

(2) 8191 NW 8th Menor
Address (number and street)

Plantation, FL, 33324
City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Plantation City Council Group 1

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 1 / 1 / 18 To 1 / 31 / 18 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . 00

Loans \$ _____, _____, 0 . 00

Total Monetary \$ _____, _____, 0 . 00

In-Kind \$ _____, _____, 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0 . 00

Transfers to Office Account \$ _____, _____, 0 . 00

Total Monetary \$ _____, _____, 0 . 00

(8) Other Distributions

\$ _____, _____, 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 300 . _____

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0 . _____

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) _____

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X [Signature]
Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

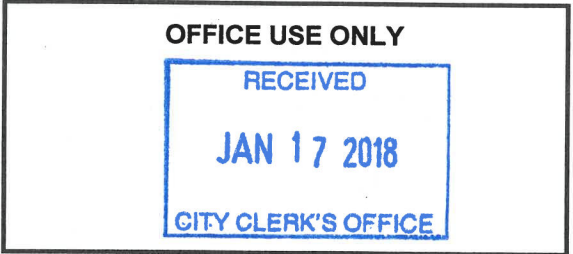
(1) Russell Fernandez
Name

(2) 8141 NW 8th Mnr
Address (number and street)

Plantation, FL, 33324
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____



(4) Check appropriate box(es):

- Candidate Office Sought: Plantation City Council Group 1
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 12 / 01 / 17 To 12 / 31 / 18 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . 00

Loans \$ _____, _____, 300 . 00

Total Monetary \$ _____, _____, 0 . 00

In-Kind \$ _____, _____, 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0 . 00

Transfers to Office Account \$ _____, _____, 0 . 00

Total Monetary \$ _____, _____, 0 . 00

(8) Other Distributions

\$ _____, _____, 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 300 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0 . 00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:


(Type name)

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
Signature

(Type name)

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Randall Fernandes (2) I.D. Number _____

(3) Cover Period 12 / 1 / 17 through 12 / 31 / 17 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
12 / 7 / 17	Randall Fernandes Plantation FL	Loan cash	candidate S	Loan			\$300.00
M1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							