

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

(PLEASE PRINT OR TYPE)

**Town of Pembroke Park  
Clerk's Office**

**DEC 22 2022**

**Received**

DEC 22 PM 1:00

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)

*WILLIAM RICHARD HODGKINS*

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

*2414 JOYCE LAKE  
HALLANDALE BEACH, FL  
33009*

**4. Telephone**

*(754) 273-2539*

**5. E-mail address**

*WILLIAMHODGKINS  
820@HOTMAIL.COM*

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

*COMMISSIONER DISTRICT #2*

**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**

*SELF - WILLIAM R. HODGKINS*

**11. Mailing Address**

*2414 JOYCE LAKE*

**12. Telephone**

*(754) 273-2539*

**13. City**

*HALLANDALE BCH*

**14. County**

*BROWARD*

**15. State**

*FL*

**16. Zip Code**

*33009*

**17. E-mail address**

*WILLIAMHODGKINS820@HOTMAIL.COM*

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

**19. Name of Bank**

**20. Address**

**21. City**

**22. County**

*BROWARD*

**23. State**

*FL*

**24. Zip Code**

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**

*12-22-22*

**26. Signature of Candidate**

*X WILLIAM R. HODGKINS*

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

I, *William Hodgkins*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*12-22-22*  
Date

*X WILLIAM R. HODGKINS*  
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY  
Town of Pembroke Park  
Clerk's Office

DEC 22 2022

Received

DEC 22 PM 1:00

I, William Richard Hodgkins,

candidate for the office of COMMISSIONER DISTRICT 2;

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

X   
Signature of Candidate

12-22-22  
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).