

CERTIFICATION

I CERTIFY THIS TO BE A TRUE & CORRECT COPY OF THE DOCUMENT ON FILE AT CITY HALL, WITNESS BY HAND AND OFFICIAL SEAL OF THE CITY OF COOPER CITY THIS

7<sup>th</sup> DAY OF June 2024  
Jedia Allen, MMC  
CITY CLERK

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.

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):  
(Please Print or Type Name)

Ryan C. Shrouder

3. Address (include PO Box or Street, City, State, Zip Code):

EXEMPT  
F.S. 119

4. Telephone:  
(754 ) 234-8440

5. Candidate's Voter Registration #:  
114692368  
(not required for qualifying purposes)

6. Email Address:  
ryan@myfillegal.com

7. Office Sought (include district, circuit, group, or seat #):

City Commissioner, Seat 4

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

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:

Ryan C. Shrouder

12. Telephone:  
(754 ) 234-8440

13. Email Address:  
ryan@myfillegal.com

14. Mailing Address:  
9700 Griffin Road

15. City:  
Cooper City

16. State:  
FL

17. Zip Code:  
33328

18. I have designated the following bank as my (check appropriate box):  Primary Depository  Secondary Depository

19. Name of Bank:  
Centennial Bank

20. Address:  
10310 Griffin Rd.

21. City:  
Cooper City

22. County:  
Broward

23. State:  
FL

24. Zip Code:  
33328

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.

25. Date: June 7, 2024

26. Signature of Candidate:

X

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

I, Ryan C. Shrouder do hereby accept the appointment designated above as:

Campaign Treasurer.  Deputy Treasurer.

28. Date: June 7, 2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X

RECEIVED

JUN - 7 2024

City of Cooper City  
City Clerk's Office

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

## OFFICE USE ONLY CERTIFICATION

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4<sup>th</sup> DAY OF June, 2024.

[Signature]  
CITY CLERK

I, Ryan Shrouder,

candidate for the office of Cooper City Commission, Seat 4 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

[Signature]  
Signature of Candidate

6/7/2024

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).

RECEIVED

JUN - 7 2024

City of Cooper City  
City Clerk's Office