

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

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

(PLEASE PRINT OR TYPE)

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OFFICE USE ONLY

NOTE: This form must be on file with the filing officer before opening the campaign account.

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

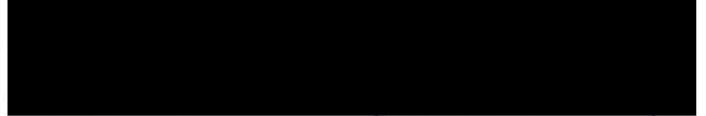
1. CHECK APPROPRIATE BOX(ES):

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)

CHRISTOPHER BENJAMIN

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



4. Telephone:

(305) 600-8723

5. Candidate's Voter Registration #:

109671796
(not required for qualifying purposes)

6. Email Address:

CHRISBENJAMIN4JUDGE@GMAIL.COM

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

117TH JUDICIAL CIRCUIT
MIAMI-DADE COUNTY JUDGE GROUP 29

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:

RODERICK HARVEY

12. Telephone:

(954) 966-4435

13. Email Address:

RHARVEY@HCT-CPA.COM

14. Mailing Address:

3816 HOLLYWOOD BLVD #203

15. City:

HOLLYWOOD

16. State:

FL

17. Zip Code:

33021

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

19. Name of Bank:

REGIONS BANK

20. Address:

450 NORTH PARK RD

21. City:

HOLLYWOOD

22. County:

BROWARD

23. State:

FL

24. Zip Code:

33021

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:

3/29/24

26. Signature of Candidate:

X

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

I, RODERICK HARVEY do hereby accept the appointment designated above as:

(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date:

3/29/2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X



Access to Handbook and the
Election Laws of the State of Florida

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Candidate/Chairperson:

CHRISTOPHER

First Name

BENJAMIN

Middle Name

Last Name

MIAMI-DADE COUNTY JUDGE, 11TH JUDICIAL CIRCUIT, GROUP 29
Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:



Candidate Qualifying Handbook

(<https://www.miamidade.gov/global/elections/candidate-qualifying-handbook.page>)

Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.



Political Committee Handbook

(<https://www.miamidade.gov/global/elections/political-committee-resources.page>)

Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by:

Candidate / Chairperson Signature

Date:

4/3/24

Primary Telephone Number:

305-600-8723

Alternate Telephone Number:

305-836-8110

E-mail address:

CHRISBENJAMIN4JUDGE@GMAIL.COM

**Campaign Treasurer's Report
Miami-Dade County Electronic Filing Requirement**



Candidate (office sought): MIAMI-DADE COUNTY JUDGE, 11TH JUDICIAL CIRCUIT
Candidate's Florida Voter Registration Number: 109671796 GROUP 29

Political Committee: _____

Party Executive Committee: _____

Other: _____


I, CHRISTOPHER BENJAMIN
(Please print name of Candidate or Chairperson)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

understand that Campaign Treasurer's Reports must be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies are no longer required.

I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade County, Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, and Community Council must now file the Vote by Mail Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, if applicable.

Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and Candidates running for the Offices of Miami-Dade County Mayor, Commissioner, and Community Council must now file the Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Political Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)4 organizations, if applicable.



Signature of Candidate or Chairperson

4/3/24

Date

Day Time Telephone Number: 305-600-8723

Alternate Contact Number: 305-336-8110

Email Address: CHRISBENJAMIN4JUDGE@GMAIL.COM

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.