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: ☐ Tr	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
SANDRA RUIZ	- 6812 NW 113TH CT, DORM, FL
4. Telephone 5. E-mail address	
(786) 314 8009 Sandra@Sandrarviz.	om 33178
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if applicable:
CITY OF DORAL MAYOR	My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> 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	
ANTHONY BRUNSON	
	12. Telephone (305) 189-6673
13. City 14. County 15. Sta Many-Dasa FL	te 16. Zip Code 17. E-mail address 33/3/ Abryngan@abcpg5oluhoms. Lam
18. I have designated the following bank as my	Primary Depository Secondary Depository
19. Name of Bank	20. Address
BB?T	
21. City 22. County	
DORAL MIAMI-DAG	DE FL 33174
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	26. Signature of Candidate
7/10/16	X Sun die fuer
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
	, do hereby accept the appointment
Date	Signature of Campaign Treasurer or Deputy Treasurer
Write-In No Party Affiliation	Party candidate. Campaign Treasurer Deputy Treasurer