

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

12 JAN 10 PM 5:05

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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)

TERETHA LUNDY THOMAS

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

73 West Flagler Street, Room 612
Miami, FL 33130

4. Telephone

(305) 349-7127

5. E-mail address

JudgeTThomas@aol.com

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

County Court Judge - Group 33

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

Latricia C. Donley, Esq.

11. Mailing Address

P.O. Box 17-1856

12. Telephone

()

13. City

Hialeah

14. County

Miami-Dade

15. State

FL

16. Zip Code

33016

17. E-mail address

lcdlaw@aol.com

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

19. Name of Bank

Sabadell United Bank

20. Address

44 West Flagler Street

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33130

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

January 10, 2012

26. Signature of Candidate


X

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

I, Latricia C. Donley, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

January 10, 2012

Date

X


Signature of Campaign Treasurer or Deputy Treasurer

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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

Teretha Lundy Thomas

11. Mailing Address

P.O. Box 17-1856

12. Telephone

()

13. City

Hialeah

14. County

Miami-Dade

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25. Date

January 10, 2012

26. Signature of Candidate

X Teretha Lundy Thomas

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

I, TERETHA LUNDY THOMAS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

January 10, 2012

Date

X Teretha Lundy Thomas
Signature of Campaign Treasurer or Deputy Treasurer