APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

DS-DE 9 (Rev. 10/10)

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MIAMI-DADE ELECTIONS

Rule 1S-2.0001, F.A.C.

NOTE: This form must be on file with the qualifying officer before opening the campaign account. OFFICE USE ONLY ((ES):

Re-filing to Change: Treasurer/Deputy Deposit 1. CHECK APPROPRIATE BOX(ES): Depository Initial Filing of Form Office Partv 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) 815 N. Homeskad Blvd. Michaelle Gonzalez- Vaulson

Telephone 5. E-mail address Ste 321 (305)349-5702 MGPINWalbellsouth not Homestead FL 33030 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: bunty Court Judge, Group 11 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. **Deputy Treasurer** Campaign Treasurer 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer Michaelle Gionzalez-Paulson 12. Telephone 815 N. Homestead Blvd Ste 301

13. City

14. County

15. State

16. Zip Code

17. E-mail address

Mami-DADE

FL

33030

mgplawa bellsouth. net 18. I have designated the following bank as my Primary Depository Secondary Depository 19. Name of Bank 1 SE3 de Avenue BANK Of AMERICA 21. City 22. County 24. Zip Code MIGHI MIGMI-DADE 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. 26. Signature of Candidate 25. Date Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. , do hereby accept the appointment (Please Print or Type Name) Deputy Treasurer. Campaign Treasurer designated above as: Signature of Campaign Treasurer or Deputy Treasurer

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MIAMI-DADE ELECTIONS

NOTE: This form must be on file with the qualifying officer before opening the campaign account. OFFICE USE ONLY & Change of address 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) Michaelle Gonzalez-Paulson 815 N. Homestad Blvd 5. E-mail address 4. Telephone (30) 1349-5702 Mgf knowbellsouthined 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: ounty Court Judge, group 11 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 candidate. Write-In No Party Affiliation Party Campaign Treasurer **Deputy Treasurer** 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer Haulson, Esq 12. Telephone 11. Mailing Address 8 | 5 | N | Nmester | B | NJ | 5 + 5 | 32 | 13. City | 14. County | 15. State | 16. Zip Code | (305) 281-6016 17. E-mail address Sqfay sona gmail com MiAMI-DADe 33030 Homestead Primary Depository 18. I have designated the following bank as my Secondary Depository 20. Address 19. Name of Bank BANK of 21. City 24. Zip Code 22. County Miami MIGMI-DADE 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 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) , do hereby accept the appointment (Please Print or Type Name) Deputy Treasurer. Campaign Treasurer designated above as: Signature of Campaign Treasurer or Deputy Treasurer