

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2016 MAR 28 AM 8:49

MIAMI-DADE
ELECTIONS

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)

LINDA LUCE

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

3191 Coral Way Suite 203
Miami, FL 33145

4. Telephone

(786) 212-1294

5. E-mail address

lindaluce@live.com

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

County Court Judge Group 15

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

Linda Luce

11. Mailing Address

3191 Coral Way, Suite 203

12. Telephone

(786) 212-1294

13. City

Miami

14. County

Miami Dade

15. State

FL

16. Zip Code

33145

17. E-mail address

lindaluce@live.com

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

19. Name of Bank

Sabadell Bank

20. Address

44 West Flagler Street

21. City

Miami

22. County

Miami Dade

23. State

FL

24. Zip Code

33125

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

March 25, 2016

26. Signature of Candidate



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

I, LINDA LUCE, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

March 25, 2016

Date


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

Bismark Ruiz

11. Mailing Address

3191 Coral Way, Suite 203

12. Telephone

(786) 212-1294

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14. County

Miami Dade

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25. Date

March 25, 2016

26. Signature of Candidate



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

I, Bismark Ruiz, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

March 25, 2016

Date


Signature of Campaign Treasurer or Deputy Treasurer