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MIAMI-DADE ELECTIONS

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):

[X] Initial Filing of Form Re-filing to Change: [] Treasurer/Deputy [] Depository [] Office [] Party

2. Name of Candidate (in this order: First, Middle, Last)

Rebeca Sosa

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

6386 SW 10th Street Miami, FL 33144

4. Telephone

(786) 458-5221

5. E-mail address

rebso3@aol.com

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

County Commission District 6

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 [X] Campaign Treasurer [] Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Jarnette G. Rodriguez

11. Mailing Address

1985 NW 88th Court, Suite 101

12. Telephone

(305) 593-2644

13. City

Doral

14. County

Miami-Dade

15. State

FL

16. Zip Code

33172

17. E-mail address

cpazos@rtc-cpa.com

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

19. Name of Bank

Interamerican Bank

20. Address

1000 SW 57th Avenue, #1

21. City

West Miami

22. County

Miami-Dade County

23. State

FL

24. Zip Code

33144

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

7/2/18

26. Signature of Candidate

[X] [Signature]

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

I, Jarnette G. Rodriguez, do hereby accept the appointment (Please Print or Type Name)

designated above as: [X] Campaign Treasurer [] Deputy Treasurer.

7/2/18 Date

[X] [Signature] Signature of Campaign Treasurer or Deputy Treasurer