

**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.

2019 AUG -5 PM 12:46

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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)
Cindy Lerner

3. Address (include post office box or street, city, state, zip code)
5901 Moss Ranch Rd.
Pinecrest, FL 33156

4. Telephone
(305) 992-3433

5. E-mail address
mayorlerner@gmail.com

6. Office sought (include district, circuit, group number)
Miami-Dade County Commission, District 7

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
Nicole Trailer

11. Mailing Address
18002 Richmond Place Drive #2817

12. Telephone
(813) 957-4716

13. City
Tampa

14. County
Hillsborough

15. State
FL

16. Zip Code
33647

17. E-mail address
itsfromnicole@gmail.com

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

19. Name of Bank
Bank of America

20. Address
11205 South Dixie Highway

21. City
Pinecrest

22. County
Miami-Dade

23. State
Florida

24. Zip Code
33156

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
July 19, 2019

26. Signature of Candidate

X

Cindy Lerner

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

Nicole Trailer

I, _____, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer ☒ Deputy Treasurer.

7/22/19

Date

X

Nicole Trailer
Signature of Campaign Treasurer or Deputy Treasurer