

**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.

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2019 SEP 13 AM 4:33

MIAMI-DADE
ELECTIONS

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)

MARCIA GIORDANO HANSEN

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

4000 PONCE DE LEON BLVD #470
CORAL GABLES, FL 33146

4. Telephone

(305) 777-0474

5. E-mail address

mgh@thehansenlawfirm.com

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

MIAMI-DADE COUNTY COURT JUDGE, GROUP 9

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

JOSE A. RIESCO, CPA

11. Mailing Address

2600 SOUTH DOUGLAS ROAD, SUITE 900

12. Telephone

(305) 445-0777

13. City

CORAL GABLES

14. County

MIAMI-DADE

15. State

FL

16. Zip Code

33134

17. E-mail address

jose@riescoandcompany.com

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

19. Name of Bank

REGIONS BANK

20. Address

3516 MAIN HIGHWAY

21. City

MIAMI

22. County

MIAMI-DADE

23. State

FL

24. Zip Code


33133

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

9/13/19

26. Signature of Candidate

X 

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

I, JOSE A. RIESCO, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer

9/13/19
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

JEANNINE R. MIRANDA

11. Mailing Address

2600 SOUTH DOUGLAS ROAD, SUITE 900

12. Telephone

(305) 445-0777

13. City

CORAL GABLES

14. County

MIAMI-DADE

15. State

FL

16. Zip Code

33134

17. E-mail address

jen@riescoandcompany.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

REGIONS BANK

20. Address

3516 MAIN HIGHWAY

21. City

MIAMI

22. County

MIAMI-DADE

23. State

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25. Date

9/13/19

26. Signature of Candidate

X 

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

I, JEANNINE R. MIRANDA, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer ☒ Deputy Treasurer.

9/13/19

Date

X



Signature of Campaign Treasurer or Deputy Treasurer