

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

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

(PLEASE PRINT OR TYPE)

RECEIVED  
2020 JUN -5 PM 12:42  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

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)

Ludmilla Domond

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

871 NE 145 street # 205  
Miami, FL 33179

4. Telephone

(954) 446-5740

5. E-mail address

Ludmilla Domond 4  
mayor@gmail.com

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

Miami-Dade County Mayor

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

Ludmilla Domond

11. Mailing Address

P.O. Box 630144

12. Telephone

(954) 446-5740

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33163

17. E-mail address

Ludmilla Domond 4 Mayor@gmail.com

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

19. Name of Bank

Iberia Bank

20. Address

18841 NE 29th Avenue

21. City

Aventura

22. County

Miami-Dade

23. State

FL

24. Zip Code

33180

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

6.5.2020

26. Signature of Candidate

X 

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

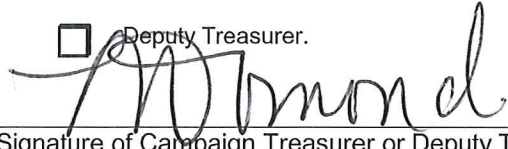
I, Ludmilla Domond, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

6.5.2020

Date

X

  
Signature of Campaign Treasurer or Deputy Treasurer