## 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

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officer before opening the campaign account.				OFFICE USE ONLY						
1. CHECK APPROPRIATE BOX(ES):										
Initial Filing of Form Re	e-filing to Change:		reasu	urer/Deputy	Depos	sitory		Office		Party
2. Name of Candidate (in this order: First, Middle, Last)				3. Address (include post office box or street, city, state, zip						
CHIAKA IHEKWABA				code) 6468 MANOR LANE,						
1. Telephone 5. E-mail address				SOUTH MIAMI, FL 33143						
(305 ) 283-0079 keepju	dgechiaka@gr	nail.co	m				V.	· · · · · · · · · · · · · · · · · · ·		
6. Office sought (include district, of	_	7. If a candidate for a <u>nonpartisan</u> office, check if								
MIAMI DADE COUNTY COURT JUDGE GROUP 35				applicable:  My intent is to run as a Write-In candidate.						
ELEVENTH JUDICIAL CIRCUIT  My intent is to run as a Write-In candida							uale.			
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										
10. Name of Treasurer or Deputy Treasurer										
ROLAND SANCHEZ MEDINA										
11. Mailing Address				12. Telephone						
1200 BRICKELL AVENUE, SI				(	305 )	377-100	00			
	County 15. State		ate			17. E-mail address				
MIAMI MIAI	MI DADE FL			33131 ROLAN			D@SMGQLAW.COM			
18. I have designated the following bank as my										
1011101110 01 201111				20. Address						
IBERIA BANK	9100	9100 SOUTH DADELAND BLVD.,STE. 107								
21. City	22. County			23. State				24. Zip Co 3 <b>3156</b>	ode	
MIAMI	MIAMI DADE			FLORID						
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.										R AND
25. Date 26. Signature of Candidate										
4/15/22				x Shekwaba						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
ROLAND SANCHEZ MEDINA , do hereby accept the appointment										
(Please Print or Type Name)										
designated above as: Campaign Treasurer Deputy Treasurer.										
4/15/22 X (Kelle-										
Date Signature of Campaign Treasurer or Deputy Treasurer										

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

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officer before opening the campaign account.								OFFICE	USE	DNLY
1. CHECK APPROPRIATE BOX(ES):										
✓ Initial Filing of Form		ling to Change:		surer/D		Depositor		Office		Party
2. Name of Candidate (in t	his order:	First, Middle, La	st)	3. Address (include post office box or street, city, state, zip						
CHIAKA IHEKWABA				code) 6468 MANOR LANE,						
4. Telephone	5. E-mail address				SOUTH MIAMI, FL 33143					
( /	keepjudgechiaka@gmail.com									
6. <b>Office sought</b> (include district, circuit, group number) MIAMI DADE COUNTY COURT JUDGE GROUP 35 ELEVENTH JUDICIAL CIRCUIT				7. If a candidate for a <u>nonpartisan</u> 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  KAREN JONES										
11. Mailing Address				12. Telephone						
6468 MANOR LANE				( 305 ) 608-3737						
13. City	14. Co	unty	15. State	1 '						
SOUTH MIAMI	OUTH MIAMI MIAMI DADE FL			33143 KARENJONESMIAMI@GMAIL.CO						.CON
18. I have designated the following bank as my										
19. Name of Bank			l l	D. Addre				407		
IBERIA BANK			91	100 SOUTH DADELAND BLVD.,STE. 107						
21. City				23. State				24. Zip Code		
MIAMI	P	MIAMI DADE		FLORIDA 33156						
UNDER PENALTIES OF PERJU	RY, I DECLA	ARE THAT I HAVE F OF CAMPAIGN DEP	READ THE FO	OREGOII	NG FORM FOR	R APPOINTM STATED IN IT	ENT OF CA	MPAIGN TRE	EASURE	R AND
25. Date	1 20		26	3. Signa	ature of Can	didate				
4/14/22 X Shekwaba										
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
I, KAREN JONES				, do hereby accept the appointment						
(Please Print or Type Name)  designated above as:  Campaign Treasurer  Deputy Treasurer.										
Date  Signature of Campaign Treasurer or Deputy Treasurer										

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

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

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 Partv 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) CHIAKA IHEKWABA 6468 MANOR LANE, 4. Telephone 5. E-mail address SOUTH MIAMI, FL 33143 (305) 283-0079 keepjudgechiaka@gmail.com 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if MIAMI DADE COUNTY COURT JUDGE GROUP 35 applicable: **ELEVENTH JUDICIAL CIRCUIT** 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 X **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer CHIAKA IHEKWABA 11. Mailing Address 12. Telephone 6468 MANOR LANE (305) 283-0079 13. City 14. County 15. State 16. Zip Code 17. E-mail address SOUTH MIAMI MIAMI DADE FL 33143 KEEPJUDGECHIAKA@GMAIL.CON 18. I have designated the following bank as my Primary Depository Secondary Depository 19. Name of Bank 20. Address **IBERIA BANK** 9100 SOUTH DADELAND BLVD.,STE. 107 21. City 22. County 23. State 24. Zip Code MIAMI MIAMI DADE **FLORIDA** 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 26. Signature of Candidate Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. CHIAKA IHEKWABA , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer. o Kwaho

DS-DE 9 (Rev. 10/10)

Date

Rule 1S-2,0001 F A C

Signature of Campaign Treasurer or Deputy Treasurer