

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2022 APR 22 PM 4:30

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)

JEFFREY M. KOLOKOFF

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

2600 SOUTH DOUGLAS ROAD, SUITE 900
CORAL GABLES, FL 33134

4. Telephone

(305) 445-0777

5. E-mail address

keepjudgejeffkolokoff@gmail.com

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

MIAMI-DADE COUNTY COURT JUDGE, 11th JUDICIAL CIRCUIT, GROUP 19

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

CITY NATIONAL BANK

20. Address

8311 SW 40 STREET

21. City

MIAMI

22. County

MAMI-DADE

23. State

FL

24. Zip Code

33155

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

4/22/22

26. Signature of Candidate

X 

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

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

designated above as: Campaign Treasurer Deputy Treasurer.

4/22/22

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

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20. Address

8311 SW 40 STREET

21. City

MIAMI

22. County

MAMI-DADE

23. State

FL

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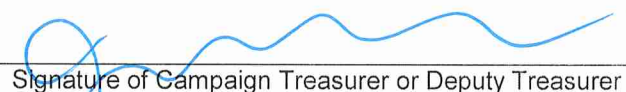
27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

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

designated above as: Campaign Treasurer Deputy Treasurer.

4/22/22
Date

X


Signature of Campaign Treasurer or Deputy Treasurer