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 filing officer before opening the campaign account.

RECEIVED

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HAMI-DADE OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): ■ Treasurer/Deputy ☐ Party ☐ Depository Office ☐ Initial Filing of Form ☐ Re-filing to Change: 3. Address (include PO Box or Street, City, State, Zip Code): 2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name) PO BOX 260863 KRISTY M. NUNEZ MIAMI, FL 33126 4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address: 109876940 judgekristynunez2024@gmail.com (305) 699-2212 (not required for qualifying purposes) 8. If a candidate for a nonpartisan office, check the box 7. Office Sought (include district, circuit, group, or seat #): if applicable: MIAMI-DADE COUNTY COURT JUDGE, 11TH JUDICIAL CIRCUIT GROUP 02 ☐ I intend to run as a Write-In Candidate. 9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a ☐ No Party Affiliation Candidate. Party candidate. 10. I have appointed the following person to act as my: Campaign Treasurer □ Deputy Treasurer 11. Name of Treasurer or Deputy Treasurer: 12. Telephone: 13. Email Address: JOSE A. RIESCO, CPA jose@riescoandcompany.com (305) 445-0777 14. Mailing Address: 15. City: 16. State: 17. Zip Code: FL 2600 S DOUGLAS ROAD. SUITE 900 CORAL GABLES 33134 18. I have designated the following bank as my (check appropriate box): 🖂 Primary Depository 🗌 Secondary Depository 19. Name of Bank: 20. Address: CITY NATIONAL BANK 2855 S LEJEUNE ROAD 21. City: 22. County: 23. State: 24. Zip Code: MIAMI DADE CORAL GABLES FL33134 UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE. 26. Signature of Candidate: 25. Date: Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box) 27. JOSE A. RIESCO do hereby accept the appointment designated above as: (Please Print or Type Name) Campaign Treasurer. Deputy Treasurer. 29. Signature of Campaign Treasurer of Deputy Treasurer 28. Date: 22/24 Rule 1S-2.001, F.A.C. DS-DE 9 (Eff. 10/23)

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

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1. CHECK APPROPRIATE BOX(ES):			ELECTIONS					
■ Initial Filing of Form □ Re-filing to Change: □ Treasure			er/Depu	ty 🗆 Dep	ository	☐ Office	Party	
2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name) KRISTY M. NUNEZ			3. Address (include PO Box or Street, City, State, Zip Code): PO BOX 260863 MIAMI, FL 33126					
4. Telephone: 5. Candidate's Voter Registrate			tion #: 6. Email Address:					
(305)699-2212	109876940 (not required for qualifying purpose		es)	judgekristynunez2024@gmail.com				
					e for a <u>r</u>	nonpartisan o	office, check the box	
MIAMI-DADE COUNTY COURT JUDG	00	if applicable: I intend to run as a Write-In Candidate.						
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a								
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐ Party candidate.								
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer								
11. Name of Treasurer or Deputy Treasurer:			12. Telephone: 13. Email A			Address:		
JEANNINE R. MIRANDA			(305)445-0777 jen@riescoandcompany.com					
		15. City		DI EC	16. St		17. Zip Code:	
2600 S DOUGLAS ROAD, SUITE 900 CORA							33134	
18. I have designated the following bank as my (check appropriate box): 🗷 Primary Depository 🗌 Secondary Depository								
19. Name of Bank: CITY NATIONAL BANK			20. Address: 2855 S LEJEUNE ROAD					
		22. Co			23. State:		24. Zip Code:	
			/II DADE		FL		33134	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.								
25. Date: 4/22/24			26. Signature of Candidate:					
25. Date: 4/22/24			X	Musty &	1.1	ling		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
JEANNINE R. MIRANDAdo hereby accept the appointment designated above as: (Please Print or Type Name)								
☐ Campaign Treasurer.					■ Deputy Treasurer.			
28. Date: 4\224			29. Signature of Campaign Treasurer of Deputy Treasurer					
DS-DE 9 (Eff. 10/23)						F	Rule 1S-2.001, F.A.C.	

Campaign Treasurer's Report Miami-Dade County Electronic Filing Requirement COUNTY



Candidate (office sought): MIAMI-DADE COUNTY COURT JUDGE, 11TH JUDICIAL CIRCUIT GROUP 02
Candidate's Florida Voter Registration Number: 109876940
Political Committee:
Party Executive Committee:
Other:
VDICTY MANUALEZ
(Please print name of Candidate or Chairperson)
understand that Campaign Treasurer's Reports <u>must</u> be filed electronically via the Supervisor Elections website by midnight of the day designated in order to comply with Miami-Dac County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miam Dade County regarding the filing of the campaign finance reports with the Supervisor of Election were recently amended in that original signed hardcopies are no longer required.
I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade Count Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, ar Community Council must now file the Vote by Mail Campaign Report (MD-ED 26) disclose the names of paid campaign workers engaged in vote by mail ballot activities, applicable.
Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Coco of Miami-Dade County, Florida, Miami-Dade County Elected Officers and Candidates running for the Offices of Miami-Dade County Mayor, Commissioner, and Community Council must now fithe Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties (MD-ED 28) publicly disclose when they commence solicitation activities for Political Committee Electioneering Communications Organizations, Political Parties, and/or 501(c) organizations, if applicable.
Signature of Candidate or Chairperson Date
Day Time Telephone Number: 305-445-0777
Alternate Contact Number: 305-699-2212
Email Address: JUDGEKRISTYNUNEZ2024@GMAIL.COM

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.