APPOINTMENT OF C AND DESIGNAT DEPOSITORY (Section 1) (PLEASE P NOTE: This form must b officer before opening the 1. CHECK APPROPRIATE	RECEIVED 2016 MAY 24 PM 3: 25 OFFICE OF THE CITY CLERK CITY OF MIAMI								
Initial Filing of Form	Re-filing to Change		reasurer/		Deposito		Office	state.	Party zin
2. Name of Candidate (in this order: First, Middle, Last) Francis X. Suarez				3. Address (include post office box or street, city, state, zip code)					
			1750 CORAL WAY, SECOND FLOOR						
4. Telephone (305) 992-3342		∕II, FL 3314	45						
	fxsuarez@aol.com	her)		7 If a cano	lidate for a	nonnarti	san office	, chec	k if
6. Office sought (include o Mayor, City of Miami		 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 X No Party Affiliation									
9. I have appointed the following person to act as my 🛛 Campaign Treasurer 🔲 Deputy Treasurer									
10. Name of Treasurer or D	Deputy Treasurer								
Jose A. Riesco, CPA 12. Telephone 11. Mailing Address 12. Telephone									
2600 South Douglas R	(305) 445-0777								
13. City	14. County	ate 16. Zip Code 17. E-mail address			·····	,	<u> </u>		
Coral Gables	Miami-Dade	FL	33	3134 jose@riescoandcompany.com					
18. I have designated the following bank as my									
19. Name of Bank	20. Address								
SunTrust bank				201 Alhambra Circle 23. State 24. Zip Code					
21. City 22. County Coral Gables Miami-Dade			23. State 24. Zip Code FL 33134						
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				ature of Can		1			
May 2	X	X Frai Seg							
27. Treasure	er's Acceptance of Appo	ointment	(fill in th	e-blanks and	check the a	appropriat	e block)		
Jose A. Riesco, CPA , do hereby accept the appointment							t		
· • • • • • • • • • • • • • • • • • • •	(Please Print or Type N	Name)			-				
designated above as: Campaign Treasurer Deputy Treasurer.									
5-24-2016 X									
<u>5- 24- 2016</u> X Date			Signature of Campaign Treasurer or Deputy Treasurer						
DS-DE 9 (Rev. 10/10)				Rule 1S-2.0001, F.A.C.					

DS-DE 9 (Rev. 10/10)

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE PRINT OR TYPE)			RECEIVED 2017 JUN 20 PH 3: 45 SFICE OF THE CITY CLERK							
NOTE: This form must	be on fil	e with the qua	lifying							
officer before opening th	ie campa	ign account.				-		OFFICE USE ONLY		
1. CHECK APPROPRIATI	•	ኝ): filing to Change:	т 🔲	reasure	r/Deputy] Deposito	ry 🗖	Office 🔲 Party		
2. Name of Candidate (in	this order	: First, Middle, L	ast)			e post offic	e box or s	treet, city, state, zip		
Francis X. Suarez				code)						
4. Telephone	5. E-ma	il address			0 CORAL WAY, SECOND FLOOR					
(305) 992-3342	fxsuare	z@aol.com		MIAMI, FL 33145						
6. Office sought (include	L		her)		7 If a corre	lidato for c	nonnarti	san office, check if		
	uistrict, ci	rcuit, group num	ber)		applicat		nonparu	san onice, check i		
Mayor, City of Miami					My intent is to run as a Write-In candidate.					
8. If a candidate for a par	rtisan offi	ce, check block	and fill	in nam	e of party as	applicable	: My inte	ent is to run as a		
Write-In No	Party Affi	liation					Pa	rty candidate.		
9. I have appointed the fe	ollowing	person to act as	s my		ampaign Trea	surer 🔀	Deput	y Treasurer		
10. Name of Treasurer or	Deputy Tr	easurer								
JEANNINE MIRANDA										
11. Mailing Address				12. Tele				phone		
2600 South Douglas F	Road, Su	ite 900					(305)	445-0777		
13. City		ounty	15. Sta		16. Zip Code	17. E-mai	ail address			
Coral Gables	Miam	ni-Dade	FL	3	3134	jen@ries	coandco	ompany.com		
18. I have designated the	e followin	g bank as my	Σ	Prir	mary Deposito	у 🗌	Seconda	ry Depository		
19. Name of Bank		, <u> </u>		20. Ad	ldress					
SunTrust bank	•			201 A	201 Alhambra Circle					
21. City		22. County			23. State			24. Zip Code		
Coral Gables		Missel Dade			FL			00404		
		Miami-Dade			15			33134		
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UNDER PENALTIES OF PERJUDES	Generica Acce	ARE THAT I HAVE OF CAMPAIGN DEI	positor bintmen NDA Name)	Y AND TH 26. Sig X t (fill in t	SOING FORM FO HAT THE FACTS	check the	ARE TRUE	MPAIGN TREASURER AND e block)		
UNDER PENALTIES OF PERJUDES 25. Date 27. Treasur 1,	Generica Acce	ARE THAT I HAVE OF CAMPAIGN DEI	positor bintmen NDA Name)	Y AND TH 26. Sig X t (fill in t	BOING FORM FO HAT THE FACTS S Inature of Can the blanks and	check the	ARE TRUE	MPAIGN TREASURER AND e block)		

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DS-DE 9 (Rev. 10/10)

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Rule 1S-2.0001, F.A.C.

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