

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

RECEIVED

2021 MAR 26 PM 2:54

OFFICE OF THE CITY CLERK
CITY OF MIAMI

(PLEASE PRINT OR TYPE)

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)

Zico Fremont

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

180 NW 49 ST
Miami FL, 33127

4. Telephone

(786) 768-3567

5. E-mail address

Zico.Fremont@gmail.com

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

Commissioner District 5

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

Zico Fremont

11. Mailing Address

180 NW 49 ST

12. Telephone

(786) 768-3567

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33127

17. E-mail address

Zico.Fremont@gmail.com

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

19. Name of Bank

BB&T

20. Address

2000 Ponce de Leon, Miami

21. City

Coral Gables

22. County

Miami-Dade

23. State

FL

24. Zip Code

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

3-26-21

26. Signature of Candidate

X

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

I, Zico Fremont, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3/26/21
Date

X
Signature of Campaign Treasurer or Deputy Treasurer

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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)

Zico Freeman

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

180 NW 49 ST
Miami FL, 33127

4. Telephone

(786) 768-3567

5. E-mail address

Zico.Freeman@gmail.com

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

Commissioner District 5.

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

Vijay Singh

11. Mailing Address

123 NE 32nd Apt 2508

12. Telephone

(305) 965-8216

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33137

17. E-mail address

VijaySingh305@gmail.com

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

19. Name of Bank

BBT

20. Address

2000 Ponce de Leon

21. City

Coral Gables

22. County

Miami

23. State

Florida

24. Zip Code


33134

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25. Date

3-26-21

26. Signature of Candidate

X 

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


I, Vijay Singh, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3/26

Date

X


Signature of Campaign Treasurer or Deputy Treasurer