

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

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

(PLEASE PRINT OR TYPE)

CITY OF CORAL GABLES
RECEIVED BY THE
OFFICE OF THE CITY CLERK

2020 OCT 23 AM 11: 56

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)

Rhonda Anne Anderson

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

2715 Hernando Street
Coral Gables, FL 33134

4. Telephone

(305) 567-3004

5. E-mail address

randersonlaw@gmail.com

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

Commission, Group II

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

Rhonda A. Anderson

11. Mailing Address

2715 Hernando Street

12. Telephone

(305) 567-3004

13. City

Coral Gables

14. County

Miami-Dade

15. State

FL

16. Zip Code

33134

17. E-mail address

randersonlaw@gmail.com

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

19. Name of Bank

City National Bank of Florida

20. Address

2855 LeJeune Road

21. City

Coral Gables

22. County

Miami-Dade

23. State

Florida

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

October 23, 2020

26. Signature of Candidate

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

I, Rhonda A. Anderson, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

October 23, 2020

Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer