

**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 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)

JUAN CARLOS BERMUDEZ

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

10769 NW 70 LANE  
DORAL, FL 33178

**4. Telephone**

(305 ) 389-8134

**5. E-mail address**

JBERMU4763@AOL.COM

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

MAYOR - CITY OF DORAL

**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 #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 OF FLORIDA

**20. Address**

8311 BIRD ROAD

**21. City**

MIAMI

**22. County**

MIAMI-DADE

**23. State**

FLORIDA

**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**

5/20/2020

**26. Signature of Candidate**

**X** 

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

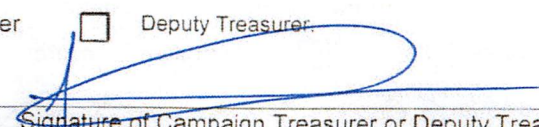
I, JOSE A. RIESCO, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

5/20/2020

Date

**X**

  
Signature of Campaign Treasurer or Deputy Treasurer