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.

2017 MAR 31 PM 12:10

CITY CLERK'S OFFICE

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)	3. Address (include post office box or street, city, state, zip code)
CINDY MATTSON	1700 MERIDIAN AVE 403 MIAMI BEACH FLORIDA 33139
4. Telephone (786) 269-2422	5. E-mail address CINDY@CINDYMATTSON.COM

6. **Office sought** (include district, circuit, group number)	7. **If a candidate for a nonpartisan office, check if applicable:**
MIAMI BEACH CITY COMMISSIONER GROUP III	☐ 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

11. Mailing Address	12. Telephone ( )

13. City	14. County	15. State	16. Zip Code	17. E-mail address

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

19. Name of Bank	20. Address
AMTRUST BANK	447 AURTHUR GODFREY ROAD

21. City	22. County	23. State	24. Zip Code
MIAMI BEACH	DADE	FL	33140

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	26. Signature of Candidate
MARCH 31, 2017	X

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

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

designated above as: ☐ Campaign Treasurer ☐ Deputy Treasurer.

X

_____ _____
Date Signature of Campaign Treasurer or Deputy Treasurer