

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

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

(PLEASE PRINT OR TYPE)

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CITY OF MIAMI BEACH  
OFFICE OF THE CITY CLERK

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)

ADRIAN GONZALEZ

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

1521 Altam Road, #112  
MB FL 33139

4. Telephone

(786) 600-5655

5. E-mail address

Adrian@dauidsoace.com

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

City MB Commissioner Group 6

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

KENNETH ROSEN

11. Mailing Address

1410 20th Street, #202

12. Telephone

(305) 321-5192

13. City

Miami Beach

14. County

DADE

15. State

FL

16. Zip Code

33139

17. E-mail address

KENROSEN75@gmail.com

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

19. Name of Bank

Bank of OZK

20. Address

1025 20th Street,

21. City

MB

22. County

DADE

23. State

FL

24. Zip Code

33139

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

3/14/19

26. Signature of Candidate

X 

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

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

designated above as:  Campaign Treasurer     Deputy Treasurer.

3-14-19

Date

X Ken

Signature of Campaign Treasurer or Deputy Treasurer