

**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@DAVIDSCAPE.COM

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

City of MB Comish 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**

ADRIAN GONZALEZ

**11. Mailing Address**

1521 Altam Road, # 112

**12. Telephone**

(786) 600-5655

<b>13. City</b> MB	<b>14. County</b> DADE	<b>15. State</b> FL	<b>16. Zip Code</b> 33139	<b>17. E-mail address</b> ADRIAN@DAVIDSCAPE.COM
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**18. I have designated the following bank as my**     Primary Depository     Secondary Depository

**19. Name of Bank**

Bank of OZK

**20. Address**

1225 20th St.

<b>21. City</b> MB	<b>22. County</b> DADE	<b>23. State</b> FL	<b>24. Zip Code</b> 33139
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**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, ADRIAN GONZALEZ, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

3/14/19

Date

X

Signature of Campaign Treasurer or Deputy Treasurer