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APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)			RECEIVED 2021 JUL 29 PM 3: 22				
(PLEASE PRINT OR TYPE) NOTE: This form must be on file with the qualifying			CITY OF MIAMI BEACH DFFICE OF THE CITY CLERK				
officer before opening the campaign account.			OFFICE USE ONLY				
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: X 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) 1521 Alton Road, Suite 112 Miami Beach, FL 33139				
Adrian Gonzalez							
4. Telephone							
(305) 2068249	adrian@davidscaf	e.com					
6. <b>Office sought</b> (include district, circuit, group number) Miami Beach Commissioner, Group 1			7. If a candidate for a <u>nonpartisan</u> 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 N/A Party candidate.							
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🗌 Deputy Treasurer							
10. Name of Treasurer or Deputy Treasurer Johan Gutierrez							
11. Mailing Address 1001 Brickell Bay Drive, Suite 2706				12. Telephone (786) 223-1751			
13. City	14. County	15. Sta	te 16	. Zip Code	17. E-mail address		
Miami	Miami Dade	FL	33131 johan@ovfinancials.com				
18. I have designated the following bank as my 🔀 Primary Depository 🗍 Secondary Depository							
				20. Address 1665 Alton Road			
21. City 22. County			23. State 24. Zip Code				
Miami Beach	Miami Dad	e		FL		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 26. Signature of Candidate							
7/29/2021			X				
27. <b>Treasurer's Acceptance of Appointment</b> (fill in the blanks and check the appropriate block)							
I,, do hereby accept the appointment							
(Please Print or Type Name)							
designated above as: X Campaign Treasurer Deputy Treasurer							
7/29/2021     X     //. ///2       Øate     Signature of Campaign Treasurer or Deputy Treasurer							
Signature of Campaign Treasurer of Deputy Treasurer							

DS-DE 9 (Rev. 10/10)