

ROBERT I. BURKE



**ADDRESS AND
PHONE NUMBER
CONFIDENTIAL
PER
FLORIDA STATUTE
119.071**

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

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

(PLEASE PRINT OR TYPE)

RECEIVED
2013 AUG 26 PM 2:57
OFFICE OF THE CITY CLERK
CITY OF MIAMI, FL

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)

ROBERT BURKE

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

[REDACTED ADDRESS]

4. Telephone

[REDACTED PHONE]

5. E-mail address

RCBURKE57@gmail.com

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

MAYOR

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

ROBERT BURKE

11. Mailing Address

[REDACTED MAILING ADDRESS]

12. Telephone

(954) 214-5157

13. City

MIAMI

14. County

USA

15. State

FL

16. Zip Code

33127

17. E-mail address

RCBURKE57@gmail.com

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

19. Name of Bank

WELLS FARGO

20. Address

9301 NW 7th Ave 33150 MIAMI FL

21. City

MIAMI

22. County

USA

23. State

FL

24. Zip Code

33150

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

08/26/13

26. Signature of Candidate

X [Signature of Robert Burke]

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

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

designated above as: Campaign Treasurer Deputy Treasurer.

08/26/13
Date

X [Signature of Campaign Treasurer or Deputy Treasurer]

OFFICE USE ONLY

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

I, ROBERT C. BURKE

candidate for the office of MAYOR

have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

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CITY OF MIAMI, FL

X

[Signature]
Signature of Candidate

08/26/13
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).