

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

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

(PLEASE TYPE)

OFFICE USE ONLY
RECEIVED

2010 MAR -4 PM 2:55
PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate: **MANUEL RICHARDSON**
1. Address (include post office box or street, city, state, zip code): **2093 SW FIRST STREET, MIAMI FL 33135**

Telephone (optional): **305-812-3985**
2. Party (Partisan candidates only): **NON-PARTISAN**
3. Office (add district, circuit or group number): **MIAMI COMMISSIONER DIST # 1**

I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer:
MANUEL RICHARDSON

5. Mailing Address (If post office box or drawer add street address): **2093 SW FIRST STREET**
6. Telephone: **305-812-3985**

7. City: **MIAMI** 8. County: **MIAMI DADE** 9. State: **FLORIDA** 10. Zip Code: **33142**

I have designated the following named bank as my Primary Depository Secondary Depository

11. Name of Bank: **BANK OF AMERICA**
12. Street Address: **2195 SW 8 STREET**

13. City: **MIAMI** 14. County: **MIAMI DADE** 15. State: **FL** 16. Zip Code: **33135**

17. Signature of Candidate:  Date: **3/3/10**

Campaign Treasurer's Acceptance of Appointment

I, MANUEL RICHARDSON, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of MANUEL RICHARDSON


who is seeking nomination or election as a NON-PARTISAN candidate to the office of
(Party)

COMMISSIONER DIST # 01 . As a duly registered voter in MIAMI COMMISSIONER DIST # 1

County, Florida, I am qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

 3/3/10
Date


Signature of Campaign Treasurer or Deputy Treasurer

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**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

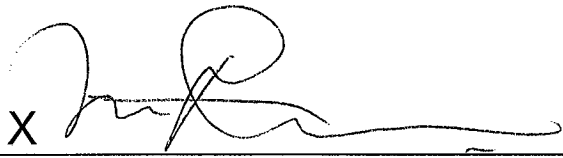
(Please Type)

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CITY CLERK
CITY OF MIAMI, FL

I, MANUEL RICHARDSON,

candidate for the office of CITY OF MIAMI COMMISSIONER DIST # 1 ;

have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X 

Signature of Candidate

03/03/10

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).