

**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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OFFICE OF THE CITY CLERK  
CITY OF MIAMI

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)

Francis X. Suarez

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

1750 CORAL WAY, SECOND FLOOR  
MIAMI, FL 33145

**4. Telephone**

(305 ) 992-3342

**5. E-mail address**

fxsuarez@aol.com

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

Mayor, City of Miami

**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**

JEANNINE MIRANDA

**11. Mailing Address**

2600 South Douglas Road, Suite 900

**12. Telephone**

( 305 ) 445-0777

**13. City**

Coral Gables

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33134

**17. E-mail address**

jen@riescoandcompany.com

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

**19. Name of Bank**

SunTrust bank

**20. Address**

201 Alhambra Circle

**21. City**

Coral Gables

**22. County**

Miami-Dade

**23. State**

FL

**24. Zip Code**

33134

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**

6/16/17

**26. Signature of Candidate**

X

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

I, JEANNINE MIRANDA, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

☐

Campaign Treasurer

☒

Deputy Treasurer.

6/16/17  
Date

X

Signature of Campaign Treasurer or Deputy Treasurer