

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

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

(PLEASE PRINT OR TYPE)

**NOTE: This form must be on file with the qualifying  
officer before opening the campaign account.**

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OFFICE OF THE CITY CLERK  
CITY OF MIAMI

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)  
Keon Hardemon

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

**4. Telephone**

**5. E-mail address**

keonhardemon@gmail.com

**6. Office sought** (include district, circuit, group number)  
Miami City Commissioner District 5

**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**  
Adia McKenzie

**11. Mailing Address**

**12. Telephone**

( 786 ) 708-2637

**13. City**  
Miami

**14. County**  
Miami-Dade

**15. State**  
FL

**16. Zip Code**  
33136

**17. E-mail address**  
adiamckenzie@gmail.com

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

**19. Name of Bank**  
Bank of America

**20. Address**  
5000 Biscayne Blvd.

**21. City**  
Miami

**22. County**  
Miami-Dade

**23. State**  
FL

**24. Zip Code**  
33137

**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**  
1/9/2016

**26. Signature of Candidate**

X

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

Adia McKenzie

I, \_\_\_\_\_, do hereby accept the appointment

(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer    ☐ Deputy Treasurer.

1/9/2016

Date

X

Adia K. McKenzie

Signature of Campaign Treasurer or Deputy Treasurer