

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

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

(PLEASE TYPE)

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CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate: LINDA GROSZ 1. Address (include post office box or street, city, state, zip code): 451 E. DILIBO DR. M.B.

Telephone (optional): 305-494-7214 2. Party (Partisan candidates only): NIA 3. Office (add district, circuit or group number): COMMISSIONER GRP VI

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

4. Name of Treasurer or Deputy Treasurer: LINDA GROSZ

5. Mailing Address (If post office box or drawer add street address): _____ 6. Telephone: _____

7. City: M.B. 8. County: MIAMI-DADE 9. State: FL. 10. Zip Code: 33139

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

11. Name of Bank: BANK UNITED 12. Street Address: 41st

13. City: M.B. 14. County: MIA-DADE 15. State: FL. 16. Zip Code: 33140

17. Signature of Candidate: [Signature] Date: 4-25-07

Campaign Treasurer's Acceptance of Appointment

I, LINDA GROSZ, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of LINDA GROSZ

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

COMMISSIONER VI . As a duly registered voter in MIAMI DADE

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.**

4-25-07
Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer