

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

2007 JAN 26 AM 11:17
CITY CLERK'S OFFICE

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate

GABRIELLE REDFERN

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

4539 ROYAL PALM AVENUE
MIAMI BEACH FLORIDA 33140

Telephone (optional)

(305) 790 5461

2. Party (Partisan candidates only)

3. Office (add district, circuit, group number)

GROUP II

I have appointed the following person to act as my



Campaign Treasurer



Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer

DANIEL E. JONAS, Esq.

5. Mailing Address (If post office box or drawer add street address)

300 71 STREET SUITE 630

6. Telephone

305 866 7621

7. City

MIAMI BEACH

8. County

MIAMI-DADE

9. State

FLORIDA

10. Zip Code

33141

I have designated the following named bank as my



Primary Depository



Secondary Depository

11. Name of Bank

CITY NATIONAL BANK

12. Street Address

300 71ST STREET

13. City

MIAMI BEACH

14. County

MIAMI-DADE


15. State

FL

16. Zip Code

33141

17. Signature of Candidate

X 

Date

1-25-07

Campaign Treasurer's Acceptance of Appointment

I, DANIEL E. JONAS, do hereby accept the appointment as
(Please Print or Type)



Campaign Treasurer



Deputy Treasurer

for the campaign of

GABRIELLE REDFERN

who is seeking nomination or election as a

candidate to the office of

(Party)

CITY COMMISSIONER

As a duly registered voter in

MIAMI-DADE COUNTY

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.

1/19/07
Date

X



Signature of Campaign Treasurer or Deputy Treasurer