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

Name of Candidate	1. Address (include post office box or street, city, state, zip code)
DAVID SUGARMAN	6174 PINE TREE DR MIAMI BEACH, FL 33140

Telephone (optional)	2. Party (Partisan candidates only)	3. Office (add district, circuit, group number)
(310) 500-7142	N/A	COMMISSIONER GRP # 111

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

4. Name of Treasurer or Deputy Treasurer: DAVID SUGARMAN

5. Mailing Address (If post office box or drawer add street address)	6. Telephone
6174 PINE TREE DR	310-500 7142

7. City	8. County	9. State	10. Zip Code
MIAMI BEACH		FL	33140

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

11. Name of Bank	12. Street Address
BANK UNITED	41ST STREET

13. City	14. County	15. State	16. Zip Code
MIAMI BEACH		FL	

17. Signature of Candidate	Date
X	10-30-2008

Campaign Treasurer's Acceptance of Appointment

I, DAVID SUGARMAN (Please Print or Type), do hereby accept the appointment as

☒ Campaign Treasurer ☐ Deputy Treasurer for the campaign of DAVID SUGARMAN,

who is seeking nomination or election as a _____ (Party) N/A candidate to the office of

COMMISSIONER 111.

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.

10-30-2008
Date

X
Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 01/08)