

**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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CITY CLERK'S OFFICE

CHECK APPROPRIATE BOX:

Original Appointment

Deputy Treasurer

Reappointment of Treasurer

Name of Candidate

Michael Gongora

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

*5838 Collins Ave #3A
Miami Beach, FL 33140*

Telephone (optional)

()

2. Party (Partisan candidates only)

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

GROUP II COMMISSION

I have appointed the following person to act as my

Campaign Treasurer

Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer

Michael Gongora

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

5838 Collins Ave # 3A

6. Telephone

(305) 260-1014

7. City

Miami Beach

8. County

Miami-Dade

9. State

FL

10. Zip Code

33140

I have designated the following named bank as my

Primary Depository

Secondary Depository

11. Name of Bank

BNY Mellon

12. Street Address

1688 Meridian Avenue

13. City

Miami Beach

14. County

Miami-Dade

15. State

FL

16. Zip Code

33139

17. Signature of Candidate

Michael C Gongora

Date

3/5/09

Campaign Treasurer's Acceptance of Appointment

I, *Michael Gongora*, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer

Deputy Treasurer

for the campaign of

Michael Gongora

who is seeking nomination or election as a

N/A

(Party)

candidate to the office of

Miami Beach Commission

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.

3/5/09

Date

Michael C Gongora

Signature of Campaign Treasurer or Deputy Treasurer