

APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

RECEIVED

OCT 01 2015

CITY OF NORTH MIAMI  
CITY CLERKS OFFICE

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

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)

CAROL FRANCES KEYS

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

12550 PALM ROAD  
NORTH MIAMI, FL  
33181

4. Telephone

(305) 891-1600

5. E-mail address

Keyslaw@Keystyle

6. Office sought (include district, circuit, group number)

Councilwoman DISTRICT 2

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

Gayle Doyle

11. Mailing Address

1870 NE 157 TER

12. Telephone

(305) 491 0015

13. City

N. MIAMI BEACH

14. County

MIAMI DADE

15. State

FL

16. Zip Code

33162

17. E-mail address

gadoyle@gmail.com

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

19. Name of Bank

TD BANK

20. Address

12000 BISCAYNE BLVD

21. City

North Miami

22. County

Miami Dade

23. State

FL

24. Zip Code

33181

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

October 1, 2015

26. Signature of Candidate

X 

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

I, Gayle Doyle, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

October 1, 2015 X  
Date

Gayle Doyle  
Signature of Campaign Treasurer or Deputy Treasurer