

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2020 MAY 12 PM 1:28

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

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)

JOHNNY G. FARIAS

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

13817 S.W. 283 TERRACE  
HOMESTEAD, FLORIDA 33033

4. Telephone

(786 ) 286-7815

5. E-mail address

vote4johnny@gmail.com

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

MIAMI-DADE COUNTY COMMISSIONER DISTRICT 9

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

BOBBI FARIAS

11. Mailing Address

13718 S.W. 283 TERRACE

12. Telephone

( 786 ) 286-7815

13. City

HOMESTEAD

14. County

MIAM-DADE

15. State

FLORIDA

16. Zip Code

33033

17. E-mail address

vote4johnny@gmail.com

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

19. Name of Bank

CENTERSTATE BANK

20. Address

28801 S.W. 157 AVENUE

21. City

HOMESTEAD

22. County

MIAMI-DADE

23. State

FLORIDA

24. Zip Code

33033

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

May 11, 2020

26. Signature of Candidate

X 

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

I, BOBBI J FARIAS, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

May 11, 2020  
Date

X

B. Farias  
Signature of Campaign Treasurer or Deputy Treasurer

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2020 MAY 12 PM 1:47

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

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)

Johnny G. Farias

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

13817 SW 283 Terrace  
Homestead, FL 33033

4. Telephone

(786) 286 7815

5. E-mail address

vote4johnny@gmail.com

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

MIAMI-Dade County Commissioner, District 9

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

Johnny G. Farias

11. Mailing Address

13718 SW 283 Terrace

12. Telephone

(786) 286-7815

13. City

Homestead

14. County

MIAMI-Dade

15. State

Florida

16. Zip Code

33033

17. E-mail address

vote4johnny@gmail.com

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

19. Name of Bank

Center State Bank

20. Address

28801 SW 157 Ave

21. City

Homestead

22. County

MIAMI-Dade

23. State

Florida

24. Zip Code

33033

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

May 12, 2020

26. Signature of Candidate

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

I, Johnny G Farias, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer  Deputy Treasurer.

May 12 2020

Date

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

RECEIVED OFFICE USE ONLY

2020 MAY 12 PM 1:29

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

I, JOHNNY G. FARIAS ,

candidate for the office of MIAMI-DADE COUNTY COMMISSIONER DISTRICT 9 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



\_\_\_\_\_  
Signature of Candidate

May 12, 2020

\_\_\_\_\_  
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).