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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

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2021 JUN -1 AM 9:57

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the	campa	ign account.	, ,						OFFICE	USE	ONLY
1. CHECK APPROPRIATE	BOX(E	S):									
✓ Initial Filing of Form	Re	-filing to Change:		reasu	rer/Deputy		Deposito	ory 🗌	Office		Party
2. Name of Candidate (in t	nis orde	r: First, Middle, La	ast)		. Address (ii	nclud	de post offic	e box or s	street, city,	state, z	zip
BRYAN AVILA					ode) O BOX 11	ເລຊາ	20				
4. Telephone	5. E-ma	ail address			IIALEAH, I						
(305) 814-8650	bryana	vila2012@gm	ail.com	1							
6. Office sought (include d	istrict, ci	rcuit, group numb	per)				didate for a	nonparti	isan office	, chec	k if
MIAMI-DADE COUNTY COMMISSIONER, DISTRICT #6 applicable: My intent is to run as a Write-In candidate						idate.					
8. If a candidate for a part	isan off	ice, check block	and fill	l in na	ame of part	y as	applicable	: My inte	ent is to run	ı as a	
Write-In No F	Party Affi	liation					the son	Pa		lidate.	
9. I have appointed the fo	lowing	person to act as	my	X	Campaign ¹	Trea	surer	Deput	y Treasure	r	
10. Name of Treasurer or D JOSE A. RIESCO, CPA		easurer									
11. Mailing Address								12. Telep	hone		
2600 SOUTH DOUGLA	S ROA	AD, SUITE 900)					(305)	445-077	77	
13. City	14. C	County	15. Sta	ate	16. Zip Co	de	17. E-mai	l address			
CORAL GABLES	MIAMI-DADE FL 33134 jose@riescoandcompany.com										
18. I have designated the	followin	g bank as my	Σ	 P	rimary Depo	osito	ry 🔲	Seconda	ry Deposito	ory	
19. Name of Bank					Address						
CITY NATIONAL BANK	(831	1 BIRD RO)				
21. City		22. County	_		23. S	tate			24. Zip Co	ode	
MIAMI		MIAMI-DADE			FL				33155		
	RY, I DECL SNATION	LARE THAT I HAVE I OF CAMPAIGN DEP	READ TH	E FOR Y AND	EGOING FOR	M FO	R APPOINTM STATED IN IT	ENT OF CA	MPAIGN TRE	ASURE	R AND
25. Date				26. \$	Signature of	Can	ndidate	-1			
06/01/2	021			X	Dy	~	e a	4			
27. Treasure	r's Acce	eptance of Appo	intment	t (fill ir	n the blanks	and	check the	appropriat	e block)		
l,		E A. RIESCO,					, do her	eby accep	t the appoi	ntment	t
	(Pleas	se Print or Type N	lame)						and the same of th		
designated above as:	\times	Campaign T	reasure	r	Deput	y Tre	easurer.				
6/1/20	21		X				*				
Date				Sign	ature of Can	npaid	gn Treasure	er or Depu	tv Treasure	er	—

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

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the	e campa	ign account.							OFFICE	USE	ONLY
1. CHECK APPROPRIATE	BOX(ES	S):									
	Re	filing to Change:	П	reasu	ırer/D	eputy [Deposito	ory 🔲	Office		Party
2. Name of Candidate (in	this order	:: First, Middle, La	ast)			lress (includ	le post offic	e box or s	treet, city,	state, z	zip
BRYAN AVILA					ode)	OV 44000					
4. Telephone	5. E-ma	il address		12		OX 11282 EAH, FL 3					
(305) 814-8650	bryana	vila2012@gm	ail.com	- 1			3011				
6. Office sought (include of	district, ci	rcuit, group numb	per)			7. If a cand	lidate for a	a nonparti	san office	, chec	k if
MIAMI-DADE COUNT				CT #		applicab				• Handy Street Process Pro-	00077/ MYS/D
27.22 000111			310111	017	,		My intent	is to run a	s a Write-Ir	n candi	date.
8. If a candidate for a par	<u>tisan</u> offi	ce, check block	and fill	in na	ame d	of party as	applicable	: My inte	ent is to rur	as a	
Write-In No	Party Affi	liation						Pa	rty cano	lidate.	
9. I have appointed the fo	llowing	person to act as	my		Cam	paign Treas	surer 🔀	Deput	y Treasure	r	
10. Name of Treasurer or D	Deputy Tr	easurer									
JEANNINE R. MIRAND)A										
11. Mailing Address								12. Telep	ohone		
2600 SOUTH DOUGLA	AS ROA	D, SUITE 900)					(305)	445-077	77	
13. City	14. C	ounty	15. Sta	ate	16.	Zip Code	17. E-mai	l address			
CORAL GABLES	ORAL GABLES MIAMI-DADE FL 33134 jen@riescoandcompany.com										
18. I have designated the following bank as my											
19. Name of Bank				20. /	Addre	ess					
CITY NATIONAL BANK	<			831	1 BIF	RD ROAD					
21. City		22. County				23. State			24. Zip Co	ode	
MIAMI		MIAMI-DADE				FL			33155		
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				26. 5	Signa	ture of Can	didate.	Λ			
06/01/21	021			X	P	Fryn	ark	_			
27. Treasure	er's Acce	ptance of Appo	intment	: (fill ir	n the	blanks and	check the	appropriat	e block)		
l,	JEAN	NINE R. MIRA	NDA				, do her	eby accep	t the appoi	ntment	:
	(Pleas	se Print or Type N	Name)								
designated above as:		Campaign T	reasure	r	\boxtimes	Deputy Trea	asurer.				
α	21		X		X	<u> </u>	~				
Date	9			Signa	ature	of Campaig	n Treasure	er or Depu	ty Treasure	er	

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

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the	e campa	ign accou	unt.						OFFI	CE USE	ONLY
1. CHECK APPROPRIATE	BOX(E	S):									
✓ Initial Filing of Form	Re	-filing to C	hange:	☐ Tr	easurei	/Deputy	Deposit	ory 🔲	Office		Party
2. Name of Candidate (in	this orde	r: First, Mi	iddle, La	ist)		ddress (includ	de post offi	ce box or	street, cit	y, state,	zip
BRYAN AVILA					code	•	20				
4. Telephone	5. E-ma	ail address	3			BOX 11282 LEAH, FL 3					
(305) 814-8650	bryana	vila2012	2@gma	ail.com		LL/ ((),	70011				
6. Office sought (include of	listrict, ci	rcuit, grou	ıp numb	er)		7. If a can	didate for	a <u>nonpart</u>	isan offi	ce, chec	k if
MIAMI-DADE COUNTY COMMISSIONER, DISTRICT #6 applicable: My intent is to run as a Write-In candidate.											
8. If a candidate for a part	tisan off	ice, check	k block	and fill	n nam	e of party as	applicable	e: My int	ent is to r	un as a	
Write-In No	Party Affi	liation						Pa	arty ca	ndidate.	
9. I have appointed the fo	llowing	person to	act as	my [Ca	ampaign Trea	surer 🔀	Depu	ty Treasu	rer	
10. Name of Treasurer or D BRYAN AVILA	eputy Tr	easurer				,					
11. Mailing Address								12. Tele	phone		
PO BOX 112829								(305	814-8	650	
13. City		ounty		15. Stat	- 1	6. Zip Code	17. E-ma	il address			
HIALEAH	MIAN	/II-DADE		FL	33	3011	bryanav	ila2012@	@gmail.	com	
18. I have designated the following bank as my											
19. Name of Bank					20. Add						
CITY NATIONAL BANK	<u> </u>	r		3	3311 E	SIRD ROAD)				
21. City MIAMI		22. Cour	•			23. State			24. Zip	Code	
o second tretton u		MIAMI-				FL			33155		
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 / /					26. Sig	nature of Can	didate	1			
06/01/2	7021				X /	John	(w	i K			
27. Treasure	er's Acce	eptance o	f Appoi	ntment	(fill in th	e blanks and	check the	appropriat	te block)		
l,	E	BRYAN A	AVILA				, do her	eby accep	ot the app	ointmen	t
	(Pleas	e Print or	Type N	ame)				,			
designated above as:		Camp	oaign Tr	easurer		Deputy Tre	easurer.	7			
06/01/202	·l			X	By	n a	with				
/ / Date				5	Signatu	re of Campaig	gn Treasur	er or Depu	ity Treasi	ırer	

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

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MIAMI-DADE COUNTY ELECTIONS DEFARMABLE

officer before opening the	campaign	account.	,5					(OFFICE	USE	ONLY
1. CHECK APPROPRIATE I	BOX(ES):										
	Re-filin	g to Change:	□ Tr	reasurer/l	Deputy [Depo	sitory		Office		Party
2. Name of Candidate (in th	is order: Fi	rst, Middle, La	ast)			de post	office box o	r stree	et, city, s	state, z	zip
BRYAN AVILA				code)		20					
4. Telephone	5. E-mail ac	ddress			OX 1128 EAH, FL						
(305) 814-8650 b	ryanavila	2012@gma	ail.com								
6. Office sought (include dis	strict, circuit	t, group numb	er)		7. If a can	didate f	or a <u>nonpa</u>	rtisan	office,	chec	k if
MIAMI-DADE COUNTY	COMMIS	SIONER, [DISTRI	CT #6	applica		ent is to run	as a \	Write-In	candi	date.
8. If a candidate for a partis	an office,	check block	and fill	in name	of party as	applica	ıble: My iı	ntent i	s to run	as a	
Write-In No Pa	arty Affiliatio	on 🔲					F	Party	candi	date.	
9. I have appointed the following	owing pers	son to act as	my	Car	npaign Trea	asurer	□ Dep	uty Tr	easurer	,	
10. Name of Treasurer or De CINDY GIL-AVILA	puty Treas	urer									
11. Mailing Address							12. Tel	ephor	ne		
PO BOX 112829							(786) 42	23-273	0	
13. City	14. Coun		15. Sta	te 16.	Zip Code	17. E-ı	mail addres	s			
HIALEAH	MIAMI-D	DADE	FL	330	011	CIND	Y.GILAVI	LA@	GMAIL	CO	M
18. I have designated the fo	ollowing ba	ank as my	X	Prima	ry Deposito	ory	Second	dary D	eposito	ry	
19. Name of Bank				20. Addr							
CITY NATIONAL BANK		<u> </u>		8311 BI	RD ROAL						
21. City MIAMI	1	. County AMI-DADE			23. State				. Zip Co	de	
					Sec. States				155		
UNDER PENALTIES OF PERJURY DESIG	NATION OF C	CAMPAIGN DEP	OSITORY	AND THAT	NG FORM FO	STATED I	NTMENT OF C	JE.	IGN TRE	ASURE	R AND
25. Date				26. Signa	ature of Car	ndidate	1				
25. Date 06/01/20	121			X To	white	Cir	ril				
27. Treasurer	s Accepta	nce of Appoi	intment	(fill in the	blanks and	d check t	he appropri	ate blo	ock)		
I,	CIND	Y GIL-AVIL	Α			, do	hereby acce	ept the	e appoin	tment	
	(Please Pi	rint or Type N	ame)				•				
designated above as:		Campaign Tı	reasurer	\boxtimes	Deputy Tre	easurer.					
06/01/20	21		X Ci	ndy !	4 Lil						
Date				Signature	of Campai	an Treas	surer or Der	uty Ti	reagurei	r	

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

2021 JUN - 1 AM 9:58

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

1	BR'	/ANI	۸۱/	ПΛ
Ι,		MIN	HV	ILA

candidate for the office of MIAMI-DADE COUNTY COMMISSIONER, DISTRICT #6; have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

Signature of Candidate

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).



Access to Handbook and the Election Laws of the State of Florida 2021 JUN -1 AM 9:58

EL CAMILDAUE COUNTY

Candidate/Chairperson:		ELECTIONS DEPARTMENT				
BRYAN	AVILA					
First Name	Middle Name	Last Name				
MIAMI-DADE COUNT	TY COMMISSIO	NER DISTRICT #6				
C	Office Sought / Organization					
I acknowledge that it is my requirements described in the County Elections Department W	e following resources	, understand and follow the available on the Miami-Dade				
✓ Candidate Qualifying Handber Contains information on State Florida, County Laws and Ha and Procedures, Important C	e Laws and Handbooks, the andbooks, Qualifying Inform	e Election Laws of the State of ation, Electronic Reporting Dates				
Political Committee Handboo Contains information on State Florida, County Laws and Ha Important Committee Informa	e Laws and Handbooks, the andbooks, Electronic Report	e Election Laws of the State of ting Dates and Procedures,				
Acknowledged by:	yn avil					
Date: 06/01/202	Candidate / Chairperson	Signature				
Primary Telephone Number:	305-445-0777					
Alternate Telephone Number:	305-814-8650					
E-mail address: bryanavi	la2012@gmail.c	om				

Campaign Treasurer's Report Miami-Dade County Electronic Filing Requirement COUNTY



Candidate (office sought): Miami-Dade County Commissioner District #6
Candidate's Florida Voter Registration Number:
Party Executive Committee:
Other: I, Bryan Avila
CO (1)
(Please print name of Candidate or Chairperson) understand that Campaign Treasurer's Reports must be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies are no longer required.
I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade County Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Vote by Mai Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, if applicable.
Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and Candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts and Community Council must now file the Reporting of Solicitation of Contributions for Politica Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Politica Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Politica Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)(4) organizations, if applicable.
Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that candidates for Property Appraiser also fill out the Miami-Dade county Contributing Entity (MD-ED 19) form for every reporting period if contributions are received from a corporation incorporated under the laws of the State of Florida or any other state or any foreign country of any partnership or any other legal entity other than a natural person, if applicable. Signature of Candidate or Chairperson Date
Day Time Telephone Number: 305 - 445 - 0777
Alternate Contact Number: 305 - 814 - 8650
Email Address: bryanavila 2012 @ gmail. com

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.