

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

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

(PLEASE PRINT OR TYPE)

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

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

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)**

PHILIPPE BIEN-AIME

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

70 NE 134 St  
North Miami, FL 33161

**4. Telephone**

(305 ) 399-3338

**5. E-mail address**

philippebienaime447@gmail.

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

Miami-Dade County Commission 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**

Aland Pierre-Canel

**11. Mailing Address**

12790 W. Dixie Hwy

**12. Telephone**

( 305 ) 316-0233

**13. City**

North Miami

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33161

**17. E-mail address**

apcpasolutions@gmail.com

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

**19. Name of Bank**

Bank of America

**20. Address**

990 NE 125 ST

**21. City**

North Miami

**22. County**

Miami-Dade

**23. State**

FL

**24. Zip Code**


33161

**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**

10/20/2021

**26. Signature of Candidate**



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

I, Aland Pierre-Canel, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

10/20/2021

Date

 Signature of Campaign Treasurer or Deputy Treasurer