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.

RECEIVED

2023 JUN -7 PM 4: 24

OFFICE OF THE CITY CLERK CITY OF MIAMI

OFFICE USE ONLY

officer before opening the	<u>∍ campa</u>	aign account.							OFFICE	= USE	ONLY	
1. CHECK APPROPRIATE Initial Filing of Form	•	:S): e-filing to Change:	: 🗆 ·	Treas	surer/[Deputy [Deposito	ory [Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip							
Alex Diaz de la Portilla	4				code) 16343 SW 256th Street							
4. Telephone	5. E-mail address				Homestead, FL 33031							
()	w.riley	@rileyfirm.org			*							
6. Office sought (include district, circuit, group number)					7. If a candidate for a <u>nonpartisan</u> office, check if							
District 1 Miami City Commissioner					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												
10. Name of Treasurer or Deputy Treasurer William W. Riley, Jr.												
11. Mailing Address								12. Tele	phone			
16343 SW 256th Street								()			
13. City		County	15. St	ate		16. Zip Code 17. E-mail address						
Homestead	Mian	ni-Dade	FL		330	33031 w.riley@rileyfirm.org						
18. I have designated the following bank as my					Primary Depository Secondary Depository							
Section 1997 And Administration of the Control of t					0. Address							
Truist Bank		T		585	57 Su	inset Dr.			T	-		
21. City		22. County				23. State			24. Zip Co	ode		
South Miami		Miami-Dade				FL			33143			
UNDER PENALTIES OF PERJUR		LARE THAT I HAVE I OF CAMPAIGN DEP								ASURE	R AND	
25. Date	25. Date 26. Signature of Candidate											
6/7/2023 X						(ACOMA)						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
ı, William W. Riley, Jr.					, do hereby accept the appointment							
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
6/7/2023 X												
Date				Sign	nature	of Campaig	n Treasure	er or Depu	ity Treasure	er	_	

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1. CHECK APPROPRIATE Initial Filing of Form		S): e-filing to Change:		Treas	surer/[Deputy [☐ Deposito	ry _] Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)						dress (inclu	de post offic	e box or	street, city,	state,	zip	
Alex Diaz de la Portilla					code) 16343 SW 256th Street							
4. Telephone	5. E-mail address				Homestead, FL 33031							
()	w.riley	@rileyfirm.org		, and the second								
6. Office sought (include district, circuit, group number)						7. If a candidate for a <u>nonpartisan</u> office, check if						
District 1 Miami City Commissioner					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 Nancy Brown												
11. Mailing Address								12. Tele	phone			
7700 N. Kendall Dr., Su	7700 N. Kendall Dr., Suite 407											
13. City	14. County 15. S			ate		Zip Code						
Miami	Mian	FL		331	56	nlb@nlbr	owncpa	owncpa.com				
18. I have designated the following bank as my Primary Depository Secondary Depository												
10 (1900) ACCOUNTS (1900) (190					0. Address							
				585	857 Sunset Dr.							
21. City		22. County				23. State			24. Zip C	ode		
South Miami		Miami-Dade				FL			33143			
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.											R AND	
25. Date 26. S						S. Signature of Candidate						
6/7/2023 X						Attomad						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I, Nancy Brown					, do hereby accept the appointment							
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
6/7/2023 X Nancy & Brom												
Date Signature of Campaign Treasurer or Deputy Treasurer								_				