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	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) Marvin Tapia					Address (include post office box or street, city, state, zip code)						
1						1901 NW SOUTH PLUTER DR#29					
	TAPIAMARVINDYAHOS.COM MIAMI, FL 33125										
Office sought (include district, circuit, group number) City Commissionr District 1					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 ☑ M Democratie M Party candidate.											
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer											
10. Name of Treasurer or Deputy Treasurer Shelby Green											
11. Mailing Address 2800 S Adams St Unit 5651					12. Telephone (850) 661 3941						
13. City Tallahassee	14. County 15. Sta Leon FL			- 1	16. Zip Code 17. E-mail address sbsllc2017@gmail.com						
18. I have designated the following bank as my Primary Depository Secondary Depository											
19. Name of Bank CITY NATIONAL BANK 21. City 22. County					20. Address 25 WEST FLAGLER						
21. City MAM					23. State	ORIDA		24. Zip C			
MITMI		MIAMI DI	ADE C	owny	F	OMP		331	39		
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. Signature of Candidate											
8/31/23					X (/)						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
, do hereby accept the appointment (Please Print or Type Name)											
designated above as:	\times	Campaign Tre	easurer.		Deputy Tr	reasurer.					
08/29/2023	7		X		h			-			
Date Signature of Campaign Treasurer or Deputy Treasurer											