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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

DS-DE 9 (Rev. 10/10)

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2016 MAY 25 AM 8: 40

OFFICE OF THE CITY CLERK

**OFFICE USE ONLY** officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): Partv Re-filing to Change: X Treasurer/Deputy Office □ Depository Initial Filing of Form 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip MIGUEL C. SOLIMAN 1436 SW 6 STREET MIAMI, FL 33135 4. Telephone 5. E-mail address miguelcsoliman@gmail.com (786 ) 367-0323 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) CITY OF MIAMI COMMISSIONER, DISTRICT #3 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 Party candidate. No Party Affiliation Write-In 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer JOSE A. RIESCO, CPA 12. Telephone 11. Mailing Address (305) 445-0777 2600 S. DOUGLAS ROAD. #900 15. State 16. Zip Code 17. E-mail address 14. County 13. City 33134 jose@riescoandcompany.com MIAMI-DADE CORAL GABLES Secondary Depository Primary Depository 18. I have designated the following bank as my 20. Address 19. Name of Bank 2000 PONCE DE LEON BLVD BB&T 24. Zip Code 23. State 21. City 22. County 33134 CORAL GABLES MIAMI-DADE 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. 26. Signature of Candidate 25. Date 5/23/16 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. JOSE A. RIESCO, CPA , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer Deputy Treasurer. designated above as: Signature of Campaign Treasurer or Deputy Treasurer Rule 1S-2.0001, F.A.C.

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

(PLEASE PRINT OR TYPE)

RECEIVED

2016 MAY 25 AM 8: 40

OFFICE OF THE CITY CLERK
CITY OF MIAMI

NOTE: This form must officer before opening th	be on file with the qualifying e campaign account.	OFFICE USE ONLY						
1. CHECK APPROPRIATE	, ,							
✓ Initial Filing of Form	Re-filing to Change: 🔲 T	Treasurer/Deputy Depository Office Party						
2. Name of Candidate (in	this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip						
MIGUEL C. SOLIMAN		code)  1436 SW 6 STREET						
4. Telephone	5. E-mail address	MIAMI, FL 33135						
(786 ) 367-0323	miguelcsoliman@gmail.com							
6. Office sought (include district, circuit, group number) CITY OF MIAMI COMMISSIONER, DISTRICT #3  7. If a candidate for a nonpartisan office, check if applicable:  My intent is to run as a Write-In candidate								
8. <b>If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable</b> : My intent is to run as a								
Write-In No	Party Affiliation	Party candidate.						
9. I have appointed the fo	llowing person to act as my	Campaign Treasurer Deputy Treasurer						
10. Name of Treasurer or D JEANNINE MIRANDA	Deputy Treasurer							
11. Mailing Address		12. Telephone						
2600 S. DOUGLAS RO	PAD, #900	( 305 ) 445-0777						
13. City	14. County 15. Sta	4 '						
CORAL GABLES	MIAMI-DADE  FL	33134   jen@riescoandcompany.com						
18. I have designated the	following bank as my	Primary Depository Secondary Depository						
19. Name of Bank		20. Address						
BB&T		2000 PONCE DE LEON BLVD  23. State 24. Zip Code						
21. City CORAL GABLES	22. County MIAMI-DADE	23. State						
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 PRE TRUE.								
25. Date 5/23/	16	X / April 26. Signeture of Carreligate						
27. Treasure	er's Acceptance of Appointment	t (fill in the blanks and check the appropriate block)						
I, JEANNINE MIRANDA , do hereby accept the appointment								
(Please Print or Type Name)								
designated above as:	Campaign Treasure	r Deputy Treasurer.						
5/20/11	ν (							
Date Signature of Campaign Treasurer or Deputy Treasurer								

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

(PLEASE PRINT OR TYPE)

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2016 AUG 10 AM 10: 36

OFFICE OF THE CITY CLERK

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

**OFFICE USE ONLY** 

officer before opening the	e campa	gn account.						011101	- 00L	UIII I	
1. CHECK APPROPRIATE BOX(ES):  Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Depository Party											
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip						
MIGUEL C. SOLIMAN				143	code) 1436 SW 6 STREET						
4. Telephone	5. E-mail address				MIAMI, FL 33135						
(786 ) 367-0323	miguelo	csoliman@gm	ail.com	n							
6. Office sought (include district, circuit, group number) CITY OF MIAMI, COMMISSIONER, DISTRICT #3					7. If a candidate for a <u>nonpartisan</u> 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 MIGUEL C. SOLIMAN											
11. Mailing Address					12. Telepho			ohone			
1436 SW 6 STREET					( 786 ) 367-0323						
13. City		County	15. Sta								
MIAMI	MIAMI-DADE FL				33135 miguelcsoliman@gmail.com						
18. I have designated the	followin	g bank as my	Σ	Prin	nary Deposito	y 🗆	Seconda	ry Deposit	ory		
19. Name of Bank				20. Ad	20. Address						
BB&T				2000 F	2000 PONCE DE LEON BLVD						
21. City	the state of the s				23. State				24. Zip Code		
MIAMI		MIAMI-DADE	Ξ		FL				33134		
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 TARE TRUE.											
25. Date 8/10/16			26. Sig	26. Signature of Candigate							
	. 🥌			$X/\!\!/$	/	wholas	-				
27. Treasurer's Acceptance of Appointment (fill in the Manks and check the appropriate block)											
, do hereby accept the appointment											
(Please Print or Type Name)											
designated above as: Campaign Treasurer Deputy freasurer.											
8/10/16 X///had Alfal											
Date Signature of Campaign Treasurer or Deputy Treasurer											

# MIGUEL C. SOLIMAN CAMPAIGN 1436 SW 6 STREET MIAMI, FL 33135 786-367-0323

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2016 MAY 25 AM 8: 40
OFFICE OF THE CITY CLERK

May 20, 2016

Todd B. Hannon, City Clerk City of Miami 3500 Pan American Drive Miami, FL 33133

RE: Miguel C. Soliman Campaign

Dear Mr. Hannon,

This letter is to inform you that effective immediately Mr. Carlos J. del Busto III is being removed as treasurer and being replaced by Mr. Jose A. Riesco, CPA as treasurer and Mrs. Jeannine Miranda is being appointed as Deputy Treasurer. In addition, the banking depository information has been changed. Ocean Bank is being replaced by BB&T Bank.

Attached please find the duly executed DS-DE 9 forms.

If you should have any questions or require additional information, please contact me.

Sincerely

Miguel C. Soliman

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

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2016 MAY 12 PM 4: 26

OFFICE OF THE CITY CLERK

officer before opening the campaign account.				OFFICE USE ONLY					
1. CHECK APPROPRIATE	BOX(ES):								
✓ Initial Filing of Form	Re-filing to Change:	: Tre	easurer/I	Deputy [	Deposito	ory 🔲	Office		Party
2. Name of Candidate (in this order: First, Middle, Last)				dress (includ	le post offic	ce box or s	street, city,	state, z	<u>z</u> ip
Miguel C. Soliman			code)		·waat				
4. Telephone 5. E-mail address				_1436 S.W. 6 Street Miami, FL 33135					
(786 ) 367-0323	miguelcsoliman@gmail.com			, 00 . 0	, 0				
6. Office sought (include district, circuit, group number)				7. If a cand	didate for a	a <u>nonpart</u>	<u>isan</u> office	, checl	k if
City of Miami Commissioner District 3				applicable:  My intent is to run as a Write-In candidate.					
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a									
Write-In No Party Affiliation Republican Party candidate.									
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer									
10. Name of Treasurer or D	eputy Treasurer	(1100 -		······································			· · · · · · · · · · · · · · · · · · ·		**************************************
Carlos J. del Busto III									
11. Mailing Address						12. Tele	phone		
1465 SW 8 Street, Suite	∍ 104B					( 305	588-250	00	
13. City	14. County	15. State		Zip Code	e 17. E-mail address				
Miami	Miami-Dade	FL	33135 carlosjdelbusto@gmail.com					والمساود والمساود والم	
18. I have designated the following bank as my			Prima	ry Depositor	у 🗖	Seconda	ary Deposito	ory	
19. Name of Bank 2				20. Address					
Ocean Bank			780 N.W. 42nd Avenue						
21. City	* · · · · · · · · · · · · · · · · · · ·			23. State 24. Zip Coo					
Miami	Miami-Dade		Florida 33126						
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	<del>Vigorial</del>	2	26. Signa	ature of Can	didate	7			
5/12/16			x D	Sur!	Value				
27. Treasure	r's Acceptance of Appo	intment (	fill in the	blanks and	check the	appropriat	e block)		
Carlos I del Rusto III									
(Please Print or Type Name)					, ao ner	eby accep	trie appoi	ntment	
designated above as:   Campaign Treasurer  Deputy Treasurer.									
5/12/2016 X als dy Vuso III									
Date	ignature	of Campaig	n Treasure	er or Depu	ty Treasure	er			