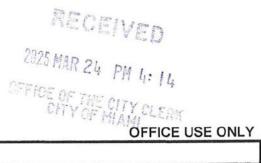
## APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

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



1. CHECK APPROPRIATE BOX(ES):						
☐ Initial Filing of Form ■ Re-filing to Change: ■	Treasur	er/Deputy	pository	☐ Office	e 🗆 Party	
2. Name of Candidate (in this order: First, Middle, Las		3. Address (include	•	or Street, Cit	y, State, Zip Code):	
(Please Print or Type Name)						
Yvonne Alexandria Bayona						
4. Telephone: 5. Candidate's Voter	Registra	tion #:   6. Email Ad	dress:			
- y,	yb4comm2024@gmail.com					
(not required for quality		/				
7. Office Sought (include district, circuit, group, or seat #):  8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:						
City of Miami Commissioner for District 3						
9. If a candidate for <u>partisan</u> office, check the box and fill in the name of the party as applicable: I intend to run as a						
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐Party candidate.						
10. I have appointed the following person to act as my:   Campaign Treasurer   Deputy Treasurer						
11. Name of Treasurer or Deputy Treasurer:		12. Telephone:		13. Email Address:		
Paul Mann	(305 ) 206-1585 Pdmann125@bellsouth.net					
14. Mailing Address: 15.		y:	16. St	ate:	17. Zip Code:	
1665 SW 23 St. Miami		FL			33145	
18. I have designated the following bank as my (check appropriate box): I Primary Depository						
19. Name of Bank:		20. Address:				
			99 Coral Way. First Floor			
\$20% The Same Same Same Same Same Same Same Sam		-Dade	23. State: FL		24. Zip Code: 33145	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE						
CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.						
25. Date: 3/18/2025		26. Signature of Candidate:				
		X Jun	ne	Dai	Bra	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)						
Paul Mann do hereby accept the appointment designated above as:						
do hereby accept the appointment designated above as:  (Please Print or Type Name)						
■ Campaign Treasurer. □ Deputy Treasurer.						
28. Date: 3/18/2025		29. Signature of C	ampaig	n Treasurer	or Deputy Treasurer	
DS-DE 9 (Rev. 09/23)		/		Rı	ile 1S-2.0001, F.A.C.	