

**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.

RECEIVED

2025 APR -2 AM 11:53

OFFICE OF THE CITY CLERK OFFICE USE ONLY  
CITY OF MIAMI

**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):  
(Please Print or Type Name)

Eileen Higgins

**3. Address** (include PO Box or Street, City, State, Zip Code):

1742 W Flagler Street  
Miami, FL 33135

**4. Telephone:**

(305 ) 333-5399

**5. Candidate's Voter Registration #:**

115053834

(not required for qualifying purposes)

**6. Email Address:**

eileen@eileenhiggins.com

**7. Office Sought** (include district, circuit, group, or seat #):

Mayor of the City of Miami

**8. If a candidate for a nonpartisan office, check the box if applicable:**

☐ I intend to run as a Write-In Candidate.

**9. If a candidate for partisan 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:**

Maria Kuhn

**12. Telephone:**

(786 ) 762-4990

**13. Email Address:**

mkuhn@edgecommfl.com

**14. Mailing Address:**

1742 W Flagler Street

**15. City:**

Miami

**16. State:**

FL

**17. Zip Code:**

33135

**18. I have designated the following bank as my** (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

**19. Name of Bank:**

Bank of America

**20. Address:**

9101 S Dixie Highway

**21. City:**

Miami

**22. County:**

Miami-Dade

**23. State:**

FL

**24. Zip Code:**

33156

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:** 4/2/2025

**26. Signature of Candidate:**

X *Eileen Higgins*

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

I, Maria Kuhn do hereby accept the appointment designated above as:  
(Please Print or Type Name)

☒ Campaign Treasurer.

☐ Deputy Treasurer.

**28. Date:** 4/2/2025

**29. Signature of Campaign Treasurer or Deputy Treasurer**

X *blask*