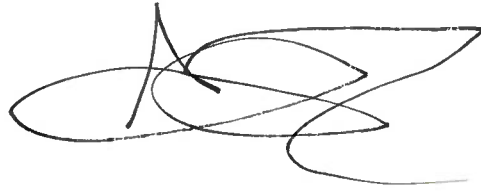


# Resignation Letter

June 4, 2025

I, ALYSSA CROCKER, resign as campaign treasurer from  
my campaign - ALYSSA CROCKER. OFFICE OF MAYOR OF  
The City of Miami.



RECEIVED

2025 JUN -4 AM 11:02

OFFICE OF THE CITY CLERK  
CITY OF MIAMI

**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 JUN -4 AM 11:16

OFFICE OF THE CITY CLERK  
CITY OF MIAMI

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):  
(Please Print or Type Name)

ALYSSA CROCKER

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

1111 NW 55th St.  
Miami, FL 33127

**4. Telephone:**

(561) 331-2238

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

(not required for qualifying purposes)

**6. Email Address:**

ALYSSA@ALYSSAFORMMIAMIcity  
Mayor.com

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

Mayor - 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:**

ALYSSA CROCKER

**12. Telephone:**

(561) 331-2238

**13. Email Address:**

ALYSSA@ALYSSAFORMMIAMI  
CityMayor.com

**14. Mailing Address:**

1111 NW 55th St.

**15. City:**

Miami

**16. State:**

FL

**17. Zip Code:**

33127

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

**19. Name of Bank:**

BankUnited

**20. Address:**

800 Brickell Ave

**21. City:**

Miami

**22. County:**

Miami-Dade

**23. State:**

FL

**24. Zip Code:**

33131

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:**

June 4, 2025

**26. Signature of Candidate:**

X

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

I, ALYSSA CROCKER

(Please Print or Type Name)

do hereby accept the appointment designated above as:

☐ Campaign Treasurer.

☒ Deputy Treasurer.

**28. Date:**

June 4, 2025

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

X

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

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

(PLEASE PRINT OR TYPE)

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☐ 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)

ALYSSA CROCKER

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

1111 NW 55th St.  
Miami, FL 33127

**4. Telephone:**

(561) 331-2238

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

(not required for qualifying purposes)

**6. Email Address:**

ALYSSA@Alyssaformiami citymayor.com

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

Mayor - 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:**

Julia Longberry

**12. Telephone:**

(330) 979-6432

**13. Email Address:**

Jaylin@Alyssaformiami citymayor.com

**14. Mailing Address:**

3018 Riverview Road

**15. City:**

Capri Coral

**16. State:**

FL

**17. Zip Code:**

33409

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

**19. Name of Bank:**

Bank United

**20. Address:**

800 Brickell Ave

**21. City:**

Miami

**22. County:**

Miami-Dade

**23. State:**

FL

**24. Zip Code:**

33131

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**25. Date:**

June 4, 2025

**26. Signature of Candidate:**

X [Signature]

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

I, Julia Longberry  
(Please Print or Type Name)

do hereby accept the appointment designated above as:

☒ Campaign Treasurer.

☐ Deputy Treasurer.

**28. Date:**

06-04-2025

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

X [Signature]