

**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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OFFICE OF THE CITY CLERK
CITY OF MIAMI

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

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)
Maxwell Manuel Martínez

3. Address (include post office box or street, city, state, zip code)
520 Brickell Key Drive
Apt. 1113
Miami, FL 33131

4. Telephone
(305) 972-5300

5. E-mail address
max@maxmart1nez.com

6. Office sought (include district, circuit, group number)
Mayor of the City of Miami

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 Democratic Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer
Maxwell Manuel Martínez

11. Mailing Address
520 Brickell Key Drive #1113

12. Telephone
(305) 972-5300

13. City
Miami

14. County
Miami-Dade

15. State
FL

16. Zip Code
33131

17. E-mail address
max@maxmart1nez.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank
Bank of America

20. Address
701 Brickell Avenue

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 APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date
11/19/20

26. Signature of Candidate

X 

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

Maxwell Manuel Martínez

I, _____, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11/19/20

Date

X


Signature of Campaign Treasurer or Deputy Treasurer