

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2017 JAN -3 PM 3:00

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)  
Zoraida A. Barreiro

**3. Address** (include post office box or street, city, state, zip code)  
2101 SW 4 Avenue  
Miami, FL 33129

**4. Telephone**  
(305 ) 856-7835

**5. E-mail address**  
zoraidabarreiro@me.com

**6. Office sought** (include district, circuit, group number)  
City 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. 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**  
Zoraida A. Barreiro

**11. Mailing Address**  
2101 SW 4 Avenue

**12. Telephone**  
( 305 ) 856-7835

**13. City**  
Miami

**14. County**  
Miami-Dade

**15. State**  
FL

**16. Zip Code**  
33129

**17. E-mail address**  
zoraidabarreiro@me.com

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

**19. Name of Bank**  
Ocean Bank

**20. Address**  
780 NW 42nd Avenue

**21. City**  
Miami

**22. County**  
Miami-Dade

**23. State**  
FL

**24. Zip Code**  
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**  
01-03-2017

**26. Signature of Candidate**

*[Handwritten Signature]*

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

I, Zoraida A. Barreiro, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

01-03-2017

Date

*[Handwritten Signature]*  
Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER  
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DEPOSITORY FOR CANDIDATES**

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RECEIVED  
2017 JAN 31 PM 12:46  
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)  
Zoraida A Barreiro

**3. Address** (include post office box or street, city, state, zip code)  
2101 SW 4 Avenue  
Miami, FL 33129

**4. Telephone**  
(305 ) 856-7835

**5. E-mail address**  
zoraidabarreiro@me.com

**6. Office sought** (include district, circuit, group number)  
City 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. 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**  
Bruno A Barreiro

**11. Mailing Address**  
2101 SW 4 Avenue

**12. Telephone**  
( 305 ) 856-7835

**13. City**  
Miami

**14. County**  
Miami-Dade

**15. State**  
FL

**16. Zip Code**  
33129

**17. E-mail address**  
brunobarreiro@me.com

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

**19. Name of Bank**  
Ocean Bank

**20. Address**  
780 NW 42 Avenue

**21. City**  
Miami

**22. County**  
Miami-Dade

**23. State**  
FL

**24. Zip Code**  
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**  
01-24-2017

**26. Signature of Candidate**

**X** 

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

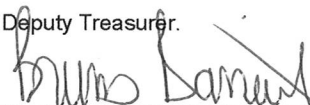
Bruno A Barreiro

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

designated above as:     Campaign Treasurer     Deputy Treasurer.

01-24-2017

**X**



Date

Signature of Campaign Treasurer or Deputy Treasurer

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**2. Name of Candidate** (in this order: First, Middle, Last)  
Zoraida A Barreiro

**3. Address** (include post office box or street, city, state, zip code)  
2101 SW 4 Avenue  
Miami, FL 33129

**4. Telephone**  
(305 ) 856-7835

**5. E-mail address**  
zoraidabarreiro@me.com

**6. Office sought** (include district, circuit, group number)  
City 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. 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**  
Loreta M Sanchez

**11. Mailing Address**  
PO Box 015862

**12. Telephone**  
( 305 ) 642-2228

**13. City**  
Miami

**14. County**  
Miami-Dade

**15. State**  
FL

**16. Zip Code**  
33101

**17. E-mail address**  
loreta92@me.com

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

**19. Name of Bank**  
Ocean Bank

**20. Address**  
780 NW 42 Avenue

**21. City**  
Miami

**22. County**  
Miami-Dade

**23. State**  
FL

**24. Zip Code**  
33126

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**25. Date**  
01-24-2017

**26. Signature of Candidate**

**X** 

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

Loreta M Sanchez


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

designated above as:     Campaign Treasurer     Deputy Treasurer.

01-24-2017

Date

**X**



Signature of Campaign Treasurer or Deputy Treasurer