

**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 qualifying officer before opening the campaign account.

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2021 JUN 11 PM 4:51

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)

MAYRA JOLI

3. Address (include post office box or street, city, state, zip code)

1221 BRICKELL AVENUE

SUITE 1210

MIAMI, FLORIDA 33131

4. Telephone

(305) 720-9021

5. E-mail address

MAYRA@JOLILAW.COM

6. Office sought (include district, circuit, group number)

MAYOR 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 ~~REPUBLICAN~~ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

MAYRA JOLI

11. Mailing Address

1221 BRICKELL AVENUE SUITE 1210

12. Telephone

(305) 720-9021

13. City

MIAMI

14. County

DADE

15. State

FL

16. Zip Code

33131

17. E-mail address

MAYRA@JOLILAW.COM

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

19. Name of Bank

BANK OF AMERICA

20. Address

2308 PONCE DE LEON BOULEVARD

21. City

CORAL GABLES

22. County

MIAMII DADE

23. State

FLORIDA

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

06/11/2021

26. Signature of Candidate

X *Mayra Joli*

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

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

designated above as: Campaign Treasurer Deputy Treasurer.

6/11/2021

Date

X

Mayra Joli
Signature of Campaign Treasurer or Deputy Treasurer