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

DS-DE 9 (Rev. 10/10)

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2022 SEP 21 PM 2: 58

OFFICE OF THE CITY CLERK
CITY OF MIAMI

Rule 1S-2.0001, F.A.C.

officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	- 1
☐ Initial Filing of Form Re-filing to Change: ☐ T	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last) 4. Telephone 5. E-mail address 186 20 30 4 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6	3. Address (include post office box or street, city, state, zip code) 2401 Overbrack St April 1 Migmi Pla 33133
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Commissioner Dist 2	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	
10. Name of Treasurer or Deputy Treasurer	
11. Mailing Address 2401 Overbrook & April	12. Telephone (786) 2023 34
13. City 14. County 15. St.	16. Zip Code 17. E-mail address 1. 3133 June 6 70 ME, 8M
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank 21. City 22. County	20. Address 35/6 Main Highway 23. State 24/Zip Code
Micmi 12000	FLA 33133
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 9/21/27 <	26. Signature of Candidate
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
I,	, do hereby accept the appointment
designated above as: Campaign Treasure	r Deputy Treasurer.
X	Signature of Campaign Treasurer or Deputy Treasurer

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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2022 SEP 15 PM 2: 53

OFFICE OF THE CITY CLERK CITY OF MIAMI

Rule 1S-2.0001, F.A.C.

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) 3. Address (include post office box or street, city, state, zip code) 4. Telephone Junelo/ome, com (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: ommissioner 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 oր Deputy Treasurer 11. Mailing Address 12. Telephone 13. City 17. E-mail address 14. County 16. Zip Code **Primary Depository** 18. I have designated the following bank as my Secondary Depository 19. Name of Bank 20. Address 21. City 22. Count 23. State 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 26. Signature of Candidate X 27. Acceptance of Appointment (fill in the blanks and check the appropriate block) Treasurer's , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer. Signature of Campaign Treasurer or Deputy Treasurer