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

RECEVED

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OFFICE OF THE CITY CLERK CITY OF MIAMI

officer before opening the campaign account.									OFFIC	CE USE	ONLY
1. CHECK APPROPRIATE BOX(ES):											
☐ Initial Filing of Form	Re-	-filing to Change:	☐ Tre	∍asur	rer/D	eputy 🔀	▼ Depository	/ <u> </u>	Office		Party
2. Name of Candidate (in this order: First, Middle, Last)					Address (include post office box or street, city, state, zip code)						
Lior Halabi					2701 Biscayne Blvd. #8223						
4. Telephone	-	5. E-mail address				Miami FL 33137					
		ct@liorhalab					·				
6. Office sought (include district, circuit, group number) City of Miami Commissioner District 2					7. If a candidate for a <u>nonpartisan</u> office, check if applicable:						
only of Milanii Commissioner District 2					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 Lior Halabi											
11. Mailing Address								12. Te	elephone		
2701 Biscayne Blvd. #8223								(30	5)890)- <u>598</u>	7
13. City	1	14. County 15. State									
Miami	Miami-Dade FL				33137 contact@liorhalabi.com						
18. I have designated the following bank as my Primary Depository											
19. Name of Bank PNC Bank		20. Address 2728 Ponce De Leon Blvd									
21. City						23. State	24. Zip (Code			
Coral Gables	, , , , , , , , , , , , , , , , , , ,					FL			33/34		
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	1 1			26. 8	26. Signature of Candidate						
1/13/2023 X a											
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I,, do hereby accept the appointment (Please Print or Type Name)											
designated above as:	•	Campaign Trea	,			Deputy Tre	easurer.				
X Signature of Campaign Treasurer or Deputy Treasurer											
. Inat/	Δ		,	Signa	ature'	<i>₩</i> off (Campair	nn Freasurer	or Depr	ity freasi'	irer	