

**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)

Michael A. Hepburn

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

P.O. BOX 420935  
Miami, Florida 33242

**4. Telephone**

( 786 ) 390-2068

**5. E-mail address**

votehepburn@gmail.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     \_\_\_\_\_ Party candidate.

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

**10. Name of Treasurer or Deputy Treasurer**

Michael A. Hepburn

**11. Mailing Address**

P.O. BOX 420935

**12. Telephone**

( 786 ) 390-2068

**13. City**

Miami

**14. County**

Miami-Dade

**15. State**

Florida

**16. Zip Code**

33242

**17. E-mail address**

votehepburn@gmail.com

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

**19. Name of Bank**

Wells Fargo Bank

**20. Address**

1752 Biscayne Blvd

**21. City**

Miami

**22. County**

Miami-Dade

**23. State**

Florida

**24. Zip Code**

33132

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**

01/12/2023

**26. Signature of Candidate**

X Michael A. Hepburn

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

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

designated above as:  Campaign Treasurer.     Deputy Treasurer.

01/12/2023

Date

X

Michael A. Hepburn

Signature of Campaign Treasurer or Deputy Treasurer