

**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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CITY OF MIAMI BEACH
OFFICE OF THE CITY CLERK

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)
Tanya Katzoff Bhatt

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

900 Bay Drive #1023
Miami Beach, FL 33141

4. Telephone

(305) 874-0830

5. E-mail address

TanyaForMiamiBeach@gmail.com

6. Office sought (include district, circuit, group number)
Miami Beach City Commission, Group VI

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate. N/A

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 N/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
Brendan Olsen

11. Mailing Address

1504 Michigan Avenue #12

12. Telephone

(305) 407-5842

13. City

Miami Beach

14. County

Miami-Dade

15. State

FL

16. Zip Code

33139

17. E-mail address

olsen.brendan@gmail.com

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

19. Name of Bank

City National Bank of Florida

20. Address

300 71st Street

21. City

Miami Beach

22. County

Miami-Dade

23. State

FL

24. Zip Code

33141

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

4/25/2023

26. Signature of Candidate

X 

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

Brendan Olsen

I, _____, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer.

Deputy Treasurer.

4/25/2023

X 

Date

Signature of Campaign Treasurer or Deputy Treasurer