

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

RECEIVED

2017 JAN -3 PM 3:00

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)  
Zoraida A. Barreiro

**3. Address** (include post office box or street, city, state, zip code)  
2101 SW 4 Avenue  
Miami, FL 33129

**4. Telephone**  
(305 ) 856-7835

**5. E-mail address**  
zoraidabarreiro@me.com

**6. Office sought** (include district, circuit, group number)  
City Commissioner, District 3

**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**  
Zoraida A. Barreiro

**11. Mailing Address**  
2101 SW 4 Avenue

**12. Telephone**  
( 305 ) 856-7835

**13. City**  
Miami

**14. County**  
Miami-Dade

**15. State**  
FL

**16. Zip Code**  
33129

**17. E-mail address**  
zoraidabarreiro@me.com

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

**19. Name of Bank**  
Ocean Bank

**20. Address**  
780 NW 42nd Avenue

**21. City**  
Miami

**22. County**  
Miami-Dade

**23. State**  
FL

**24. Zip Code**  
33126

**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**  
01-03-2017

**26. Signature of Candidate**



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

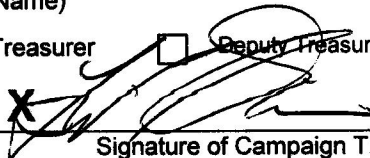
Zoraida A. Barreiro

I, \_\_\_\_\_, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

01-03-2017

Date



Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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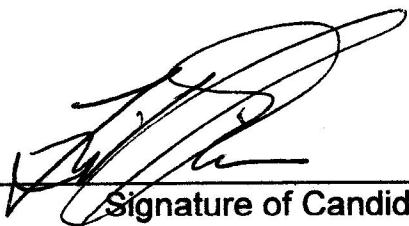
OFFICE OF THE CITY CLERK  
CITY OF MIAMI

I, Zoraida A. Barreiro ,

candidate for the office of City Commission, District 3 ;

have been provided access to read and understand the requirements of  
Chapter 106, Florida Statutes.

X



Signature of Candidate

01-03-2017

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).