

RECEIVED

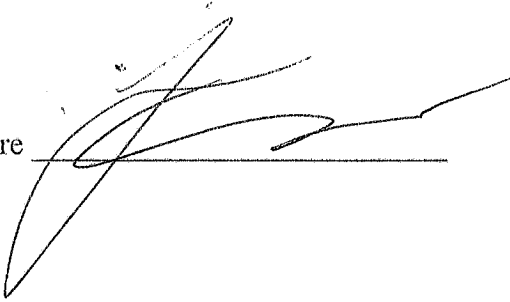
2013 FEB -8 PM 12:07

OFFICE OF THE CITY CLERK
CITY OF MIAMI, FL

FRANK CAROLLO

**Address & Phone
Number confidential
Per Florida Statute
119.07**

Signature

A handwritten signature in black ink, appearing to be 'Frank Carollo', written over a horizontal line.

Date

02/08/13

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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OFFICE USE ONLY

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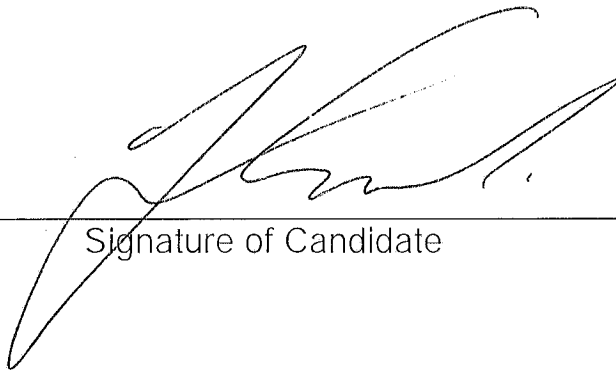
OFFICE OF THE CITY CLERK
CITY OF MIAMI, FL

I, Frank Carollo,

candidate for the office of City of Miami Commissioner, District 3 ;

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

X



Signature of Candidate

02/08/2013

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).

**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, FL**

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)

Frank Carollo

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

P.O. BOX 440722
Miami, FL 33144 FSS 119 07

4. Telephone

(305) 442-7742

5. E-mail address

N/A

6. Office sought (include district, circuit, group number)

Miami 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

Jose A. Riesco, CPA

11. Mailing Address

95 Merrick Way, Suite 250

12. Telephone

(305) 445-0777

13. City

Coral Gables

14. County

Miami-Dade

15. State

FL

16. Zip Code

33134

17. E-mail address

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

19. Name of Bank

Chase Bank

20. Address

801 SW 27th Avenue

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33135

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

02 / 08 / 2013

26. Signature of Candidate

X

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

I, Jose A. Riesco, CPA, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2/8/13
Date

X [Signature]
Signature of Campaign Treasurer or Deputy Treasurer

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AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

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

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Miami, FL 33144

FSS 119 07

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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

Monica Martinez

11. Mailing Address

P.O. Box 440722

12. Telephone

() _____

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33144

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25. Date

02/08/2013

26. Signature of Candidate

X 

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

I, Monica Martinez, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2/8/2013

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer