| | | | | | RP | FCEIVE | - D | | |
|--|---------------------------------|--------|--|----------------|-------------------------------|----------|-----|--------------|----------|
| APPOINTMENT OF C | | | 2014 FEB - 4 PM 12: 19 | | | | | | |
| | ON OF CAMPAIGN OR CANDIDATES | | 2014 FED 74 FIT 12 13 | | | | | | |
| | 6.021(1), F.S.) | | OFFICE OF THE CITY CLERK GITY OF MIAMI, FL | | | | | | |
| (PLEASE PR | INT OR TYPE) | | | | | | | | |
| 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: | ר 🗖 | - | irer/Deputy | | Deposit | - | Office | Party |
| 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) 4. Telephone 5. E-mail address | | | | | | | | | |
| 305 250-5430 WGORTE MiniGev.com Migini Fl- 33142 | | | | | | | | | |
| 6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if applicable: | | | | | | | | | |
| COMMESIONAR DISTRICT My intent is to run as a Write-In candid | | | | | | | | 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 | | | | | | | | | |
| 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer | | | | | | | | | |
| TAUSTO ALVAREZ 11. Mailing Address | | | | 12. Telephone | | | | | |
| | | | | (305) 442-1010 | | | | | |
| 13. City | 14. County | 15. St | And a second sec | | | | | | |
| MIAMI | Miami Dade | FL | | | 33145 FAUSTO & Bellsouth. Net | | | | |
| 18. I have designated the following bank as my | | | Primary Depository Secondary Depository | | | | | | |
| 19. Name of Bank Sabadell United Bank | | | 20. Address 102 NW 37 Ave | | | | | | |
| 21. City 22. County | | | ADE Elorida | | | | | 24. Zip Code | |
| MiAni- | MIAMI | - D n | De | | Flor | rida | | 33131 | r |
| 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 /- / / | 26. Signature of Candidate | | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | |
| I, FAUSTO ALVAREZ, , do hereby accept the appointment (Please Print or Type Name) | | | | | | | | tment | |
| designated above as: | Campaign T | | r | Dep | uty Tre | easurer. | | | |
| Date X | | | Dearme 12 | | | | | | |
| | | | | | | | | | |
| DS-DE 9 (Rev. 10/10) Rule 1S-2.0001, F.A.C. | | | | | | | | | |

OFFICE USE ONLY STATEMENT OF CANDIDATE (Section 106.023, F.S.) (Please print or type) Ι. candidate for the office of have been provided access to read and understand the requirements of Chapter 106, Florida Statutes. 8 Х Signature of Candidate 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). DS-DE 84 (05/11)