

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

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

(PLEASE PRINT OR TYPE)



*OR*

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)

*Jose' M. Lorenzo*

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

*8784 NW 112 Place  
Doral FL 33178*

4. Telephone

*(786) 2415661*

5. E-mail address

*operadojml@gmail.com*

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

*Council seat #2*

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

*Elvira R. Ojeda*

11. Mailing Address

*8784 NW 112 Place Doral FL 33178*

12. Telephone

*(786) 2415664*

13. City

*Doral*

14. County

*Miami Dade*

15. State

*FL*

16. Zip Code

*33178*

17. E-mail address

*E.Ojeda.Maccie@gmail.com*

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

19. Name of Bank

*Bank of America*

20. Address

*2680 NW 107 AV*

21. City

*Doral*

22. County

*Miami Dade*

23. State

*FL*

24. Zip Code

*33172*

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

*05/24/2018*

26. Signature of Candidate

*X [Signature]*

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

I, *Elvira R. Ojeda*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*5/24/2018*

Date

*X*

Signature of Campaign Treasurer or Deputy Treasurer