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

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

2020 JUN - 1 AM 9: 01

BROWARD COUNTY

officer before opening the campaign account.								OFFICE	USE	ONLY	
1. CHECK APPROPRIATE	BOX(E	S):									
Initial Filing of Form	Re	-filing to Change:	☐ Tre	easurer/	Deputy [Deposito	ory 🔲	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)					dress (inclu	de post offic	ce box or s	treet, city,	state, :	zip	
CASIMIRO NAVARRO				code) 8964 SW 52ND PLACE							
4. Telephone	5. E-ma	il address		COOPER CITY, FL 33328							
(954) 868-0832	CAZI66	658@GMAIL.C	COM								
6. Office sought (include district, circuit, group number)				7. If a candidate for a <u>nonpartisan</u> office, check if							
OUEDIES OF BROWARD COUNTY				applicable:							
SHERIFF OF BROWARD COUNTY				My intent is to run as a Write-In candidate.							
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a											
Write-In No Party Affiliation REPUBLICAN Party candidate.											
9. I have appointed the following person to act as my											
10. Name of Treasurer or Deputy Treasurer											
EILEEN PADILLA-NAVARRO											
11. Mailing Address							12. Teler				
8964 SW 52ND PLACE						T	<u> L.` </u>	224-640)6		
			15. Stat								
COOPER CITY BROWARD FL											
18. I have designated the following bank as my Primary Depository Secondary Depository											
19. Name of Bank 20. Address											
WE FLORIDA FINANC	AL CR	·		982 N					**************************************		
21. City		22. County			23. State			24. Zip Co	ode		
MARGATE		BROWARD			FL			33063			
UNDER PENALTIES OF PERJU		ARE THAT I HAVE OF CAMPAIGN DEF							EASURE	R AND	
25. Date				26. Signature of Candidate							
06/01/2020				X	C /ws	in					
27. Treasurer's Acceptance of Appointment (fill in the planks and check the appropriate block)											
I, EILEEN PADILLA-NAVARRO , do hereby accept the appointment											
	(Pleas	se Print or Type N	Name)			, 40 1101	oby dooop	t the apper		`	
designated above as:	×	Campaign T	reasurer		Deputy Tre	easurer.					
06/01/2020 X					2/	2					
Date Signature of Campaign Treasurer or Deputy Treasurer											
DS-DE 9 (Rev. 10/10)					12			Rule 1S-2.	0001,	F.A.C.	

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officer before opening the campaign account.									OFFICE	USE	ONLY
1. CHECK APPROPRIATE BOX(ES):											
Initial Filing of Form	Re	-filing to Change:	X T	reasu	urer/D	eputy _	Deposito	ory 🔲	Office		Party
2. Name of Candidate (in the	nis order	r: First, Middle, La	ast)			lress (includ	le post offic	e box or s	treet, city,	state, z	zip
CASIMIRO NAVARRO				C	code) 8964 SW 52ND PLACE						
4. Telephone	5. E-ma			COOPER CITY, FL 33328						,	
(954) 868-0832	CAZI66	658@GMAIL.COM						1.			
6. Office sought (include d	oer)		7. If a candidate for a <u>nonpartisan</u> office, check if								
SHERIFF OF BROWARD COUNTY					applicable: My intent is to run as a Write-In candidate.						idate.
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a											
Write-In No Party Affiliation REPUBLICAN Party candidate.											
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer											
10. Name of Treasurer or D	eputy Tr	reasurer			MANUFACTURE OF THE PARTY OF THE						
CASIMIRO NAVARRO											
11. Mailing Address							, ,	12. Telep			
8964 SW 52ND PLACE								<u> Li</u>	868-083	32	
13. City	1	County	15. Sta								
COOPER CITY BROWARD FL			FL	33328 CAZI6658@GMAIL.COM							
18. I have designated the following bank as my											
19. Name of Bank				20. /	Addre	ess					
WE FLORIDA FINANCI	AL CR			1982	2 N S	SR 7					
21. City		22. County				23. State			24. Zip Co	ode	
MARGATE		BROWARD		Ampidanous involves		FL			33063		
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.											R AND
25. Date 2				26. 8	26. Signature of Candidate						
06/01/2020				X		Ch	noan				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I, CASIMIRO NAVARRO						/	. do her	ebv accep	t the appoi	ntmen	t
(Please Print or Type Name)											
designated above as:		Campaign T	reasure	r <	X	Deputy Tre	asurer.	,			
06/01/2020 X											
Date				Sign	ature	of Campaig	n Treasure	er or Depu	ty Treasure	er .	

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

2020 JUN - I AM 9: 01

EROWARD COUNTY

I. CASIMIRO "CAZI" NAVARRO

candidate for the office of SHERIFF OF BROWARD COUNTY;

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

Signature of Candidate

06/01/2020 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).

X