'24 APR 22 2:28 PM

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 filing officer before

opening the campaign account. OFFICE USE ONL				
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):		3. Address (include PO Box or Street, City, State, Zip Code):		
(Please Print or Type Name) RAFAEL SMAEL LOPEZ		1640 PHALROSE LANE CANTONMENT FL 32.533		
17/11/10 (3/4)		CANTONMENT FL 32550		
4. Telephone: 5. Candidate'	e: 5. Candidate's Voter Registration #: 6. Email Address:			
(\$50) 723 5369 (not required				
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:				
COUNTY COMMISSIONED DISTRICT 5, ESCAMBIA I intend to run as a Write-In Candidate.				
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a				
☐ Write-In Candidate. ☐ Party candidate.				
10. I have appointed the following person to act as my:				
11. Name of Treasurer or Deputy Treasurer: 12. Telephone: 13. Email Address: @MAIL.				
ISILA LOPEZ (706)910-6730 MAKEEGCAMBIA GREAT AGAIN @				
14. Mailing Address:	15. City	· (16. State:	17. Zip Code:
1640 PHALROSE LANE		NMENT	FL	32533
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository				
BALK OF AMERICA		20. Address: 5041 BAYOU BLVD		
21. City: PENSACOLA, T	22. Co		23. State:	24. Zip Code:
			4-1	82533
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.				
25 Deter // 0.0		26. Signature of C	andidate:	
25. Date: 4-22-2024 X				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)				
I Isila Lopez do hereby accept the appointment designated above as:				
do hereby accept the appointment designated above as: (Please Print or Type Name)				
Campaign Treasurer.			reasurer.	
29. Signature of Campaign Treasurer of Deputy Treasurer				
28. Date: 22 April 2024		X 20202		
DS-DE 9 (Eff. 10/23)		00		Rule 1S-2.001, F.A.C.