

**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 officer before opening the campaign account.**

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MIAMI-DADE  
ELECTIONS

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)

CALIXTO GARCIA

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

6965 HARDING #501

MB FL 33141

**4. Telephone**

(305) 336-1780

**5. E-mail address**

DTCGARCIA@AOL.COM

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

MIAMI-DADE COMMISSIONER DISTRICT 5

**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**

ELOY APARICIO

**11. Mailing Address**

1805 S.W. 8

**12. Telephone**

(305) 643-9800

**13. City**

MIAMI

**14. County**

DADE

**15. State**

FLORIDA

**16. Zip Code**

33135

**17. E-mail address**

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

**19. Name of Bank**

Regions Bank

**20. Address**

2205 S.W. 8<sup>TH</sup>

**21. City**

MIAMI

**22. County**

DADE

**23. State**

FLORIDA

**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**

2/7/12

**26. Signature of Candidate**

X Calixto Garcia

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

I, ELOY APARICIO, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

Campaign Treasurer     Deputy Treasurer.

2/7/12  
Date

X Eloy Aparicio BA  
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)  
(Please print or type)

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ELECTIONS

I, Calixto Garcia,

candidate for the office of DADE-COUNTY COMMISSIONER DISTRICT 5 ;

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

X Calixto Garcia  
Signature of Candidate

2/7/12  
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).



**Campaign Treasurer's Report  
Electronic Filing Requirements  
for Miami-Dade County**



- Candidate (office sought): MIAMI-DADE COUNTY COMMISSIONER DISTRICT 5
- Political Committee: \_\_\_\_\_
- Party Executive Committee: \_\_\_\_\_
- Other: \_\_\_\_\_

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I, Calisto Garcia  
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies are no longer required.

Calisto Garcia  
Signature of Candidate or Chairperson

2/7/12  
Date

Day Time Telephone Number: (305) 336-1780

Alternate Contact Number: (305) 856-9090

Email Address: DRC@GARCIA@Aal.Com

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