

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

12 FEB 14 AM 10:47

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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)

CALIXTO GARCIA

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

6965 HARDING AVE. APT #501
MIAMI BEACH, FL. 33141

4. Telephone

(305) 336-1780

5. E-mail address

dr c GARCIA @ 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. 8TH ST.

12. Telephone

(305) 643-9800

13. City

MIAMI

14. County

DADE

15. State

FL

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. 8TH ST

21. City

MIAMI

22. County

DADE

23. State

FLORIDA

24. Zip Code

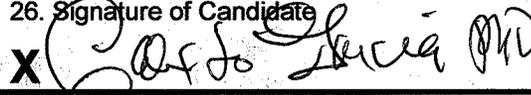
33135

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

2/13/12

26. Signature of Candidate

X 

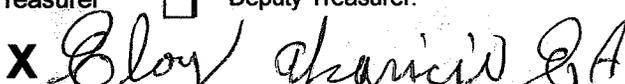
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, ELOY APARICIO, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2/13/12

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

RECEIVED

12 FEB 14 AM 10:47

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

(PLEASE PRINT 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: 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 AVE. APT #501
MIAMI BEACH, FL. 33141

4. Telephone

(305) 336-1780

5. E-mail address

drcgarcia@aol.com

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

MIAMI-DADE-COUNTY 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

Hector A. Torres

11. Mailing Address

524 S.W. 1ST APT 1404

12. Telephone

(786) 203-8424

13. City

MIAMI

14. County

DADE

15. State

FLORIDA

16. Zip Code

33128

17. E-mail address

HectorATorres38@yahoo.com

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

19. Name of Bank

Regions Bank

20. Address

2205 S.W. 8TH ST

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

2/13/12

26. Signature of Candidate

X

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

I, Hector A. Torres, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2/13/12
Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer