

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

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

(PLEASE PRINT OR TYPE)

2016 MAY 23 PM 2:18

MIAMI-DADE  
ELECTIONS

**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)

Alfred Santamaria

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

3750 NW 87 Ave, Suite 520  
Doral, FL 33178

**4. Telephone**

(305 ) 477-9336

**5. E-mail address**

SantamariaAlfredaCampaign2016@gmail.com

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

Miami-Dade County Mayor

**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**

Alberto J. Ibarra

**11. Mailing Address**

3750 NW 87 Ave, Suite 520

**12. Telephone**

( 305 ) 477-9336

**13. City**

Doral

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33178

**17. E-mail address**

SantamariaAlfredaCampaign2016@gmail.com

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

**19. Name of Bank**

Wells Fargo, N.A.

**20. Address**

1700 NW 87 Ave

**21. City**

Miami

**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**

5-23-16

**26. Signature of Candidate**

X

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

I, Alberto J. Ibarra, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer    ☐ Deputy Treasurer.

5-23-16

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.)

(PLEASE PRINT OR TYPE)

**NOTE:** This form must be on file with the qualifying officer before opening the campaign account.

2016 MAY 23 PM 2:18

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)

Alfred Santamaria

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

3750 NW 87 Ave, Suite 520  
Doral, FL 33178

**4. Telephone**

(305 ) 477-9336

**5. E-mail address**

Santamaria campaign 2016 @  
gmail.com

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

Miami-Dade County Mayor

**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**

Leonor Santamaria

**11. Mailing Address**

3750 NW 87 Ave, Suite 520

**12. Telephone**

( 305 ) 477-9336

**13. City**

Doral

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33178

**17. E-mail address**

Santamaria campaign 2016@gmail.com

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

**19. Name of Bank**

Wells Fargo, N.A.

**20. Address**

1700 NW 87 Ave

**21. City**

Miami

**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**

5-23-16

**26. Signature of Candidate**

X 

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

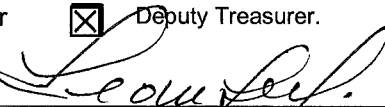
I, Leonor Santamaria, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer    ☒ Deputy Treasurer.

5-23-16

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.)

(PLEASE PRINT OR TYPE)

2016 MAY 23 PM 2:18

MIAMI-DADE  
ELECTIONS

**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)

Alfred Santamaria

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

3750 NW 87 Ave, Suite 520  
Doral, FL 33178

**4. Telephone**

(305 ) 477-9336

**5. E-mail address**

Santamaria.campaign2016@gmail.com

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

Miami-Dade County Mayor

**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**

Darling Rozo

**11. Mailing Address**

3750 NW 87 Ave, Suite 520

**12. Telephone**

( 305 ) 477-9336

**13. City**

Doral

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33178

**17. E-mail address**

Santamaria.campaign2016@gmail.com

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

**19. Name of Bank**

Wells Fargo, N.A.

**20. Address**

1700 NW 87 Ave

**21. City**

Miami

**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**

5-23-16

**26. Signature of Candidate**

X

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

I, Darling Rozo, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer    ☒ Deputy Treasurer.

5-23-16

Date

X

Signature of Campaign Treasurer or Deputy Treasurer