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

officer before opening the	OFFICE USE ONLY												
1. CHECK APPROPRIATE BOX(ES):													
	Re	e-filing to Change:		reası	urer/[Deputy [Deposito	ory 🔲	Office		Party		
2. Name of Candidate (in t	3. Address (include post office box or street, city, state, zip												
Alfred Santamaria					code)								
4. Telephone	hone 5. E-mail address					3750 NW 87 AVe, Suite 520 Doral, FL 33178							
(305) 477-9336 Santam Eria Campaign 2016 Egmail. com													
6. Office sought (include d	istrict, ci	ircuit, group numb	per)	7. If a candidate for a <u>nonpartisan</u> office, check if									
Miami-Dade County Ma	ıyor			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		12. Telephone											
3750 NW 87 Ave, Suite	(305) 477-9336												
13. City	i i	County	15. Sta	· I									
Doral	Miami-Dade FI			33178 santamariacampaign 2016@gmail.com						,			
18. I have designated the following bank as my						Primary Depository Secondary Depository							
19. Name of Bank				20. Address									
Wells Fargo, N.A.				1700 NW 87 Ave							-		
21. City						23. State			24. Zip Co	ode	_		
Miami		Miami-Dade				FL	33172	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.											R AND		
25. Date	26. Signature of Candidate												
5-23-16	X Lafry.												
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
I, Alberto I. Ibarra					, do hereby accept the appointment								
(Please Print or Type Name)													
designated above as: Campaign Treasurer Deputy Treasurer.													
5-23-16			X		?/U	Mr.	2						
Date	7	Signature of Campaign Treasurer or Deputy Treasurer											

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

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

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MIAMI-BAPE ELECTIONS

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1. CHECK APPROPRIATE	•	•											
	Re	e-filing to Change:	. 🔲 Т	reası	urer/D	Deputy _	Deposito	ory 🗌	Office		Party		
2. Name of Candidate (in t		3. Address (include post office box or street, city, state, zip											
Alfred Santamaria				code) 3750 NW 87 AVe, Suite 520									
4. Telephone		ail address		Doral, FL 33178									
(303) 477-9336			gmail, cor										
6. Office sought (include d	istrict, ci	rcuit, group numb	per)		7. If a candidate for a <u>nonpartisan</u> office, check if								
Miami-Dade County Mayor					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 fo	llowing	person to act as	s my		Cam	npaign Treas	surer 🔀	Deput	ty Treasure	r			
10. Name of Treasurer or Deputy Treasurer													
Leonor Santamaria													
11. Mailing Address					12. Telephone								
3750 NW 87 Ave, Suite	(305) 477-9336												
13. City	14. C	15. Sta	ate		Zip Code								
Doral	Miami-Dade FI				33178 Santemaria campaign 2016 @gmail. com								
18. I have designated the	Í F	Primary Depository Secondary Depository											
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Wells Fargo, N.A.		My 100 - 700 - 100		170	<u>10 NV</u>	N 87 Ave			····				
21. City	1					23. State			24. Zip Co	ode			
Miami		Miami-Dade				FL		33172					
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25. Date	26. Signature of Candidate												
5-23	X	X /1/2.											
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 T	reasurer	r	\boxtimes	Deputy Tre	asurer.	1					
5-23-1	6		X 6	\geq	4	20111¥	loef!	<i>/</i>					
Date Signature of Campaign Treasurer or Deputy Treasurer													

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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	Re	e-filing to Change:	Т	reası	urer/Dep	puty 🗀	Deposito	ry 🔲	Office		Party	
2. Name of Candidate (in thi		3. Address (include post office box or street, city, state, zip										
Alfred Santamaria				- 1	code) 2750 NN	NA/ 07 AN	Va Suita	E20				
4. Telephone 5	Telephone 5. E-mail address					IVV 87 AV FL 33178	Ve, Suite 8	520	q			
(305) 477-9336 Sar	vitamo	mi'acampaignac	.016 Q Gmail-co		,0,0,,	L 00						
6. Office sought (include dis		7. If a candidate for a <u>nonpartisan</u> office, check if										
Miami-Dade County Mayor					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 follo	owing	person to act as	my :		Campa	aign Treas	surer 🔀	Deput	y Treasure	r		
10. Name of Treasurer or Deputy Treasurer												
Darling Rozo												
11. Mailing Address								12. Telep	hone			
3750 NW 87 Ave, Suite 5					(305)	477-933	36					
13. City		County	15. Sta								-	
Doral	Doral Miami-Dade Fl				33178	8	Santumari	a campaisr	12016@gm	arl-con	2	
18. I have designated the following bank as my						Primary Depository Secondary Depository						
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Wells Fargo, N.A.	1700 NW 87 Ave											
21. City						23. State			24. Zip Code			
Miami	!	Miami-Dade			<u> </u>	FL		33172				
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25. Date	26.	26. Signature of Candidate										
5-93-	X	X Syly.										
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
l,		, do hereby accept the appointment										
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
5-23-16	!		X		<u></u>	- 0 -	3~2_					
Date					Signature of Campaign Treasurer or Deputy Treasurer							