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.

RECEIVED

2019 FEB - I PM 1:31

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the campaign account.									OFFICE	EUSE	ONLY	
1. CHECK APPROPRIATE Initial Filing of Form		5): -filing to Change:		reası	urer/Dep	puty 🔀	Depositor	у 🗆	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last) JUAN . ZAPATA					3. Address (include post office box or street, city, state, zip code) PO BOX #527623							
4. Telephone	5. E-ma	il address	120	MIAMI, FLORIDA 33152								
(305) 529-5440	cpazos	@gemrtcpa.c	om	N 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4								
6. Office sought (include district, circuit, group number)				7. If a candidate for a <u>nonpartisan</u> office, check if							k if	
MIAMI-DADE COUNTY MAYOR				applicable: My intent is to run as a Write-In candidate.						idate.		
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												
10. Name of Treasurer or Deputy Treasurer CARLOS M. TRUEBA												
11. Mailing Address							1	12. Telep	hone			
2600 DOUGLAS ROAD, SUITE 800				(305) 529-5440								
13. City	13. City 14. County 15. Sta				ate 16. Zip Code 17. E-mail address							
CORAL GABLES	CORAL GABLES MIAMI-DADE FLORI				RIDA 33134 CPAZOS@GEMRT-CPA.COM							
18. I have designated the following bank as my												
19. Name of Bank				20. Address								
BankUnited				215	9 Cora							
21. City				23. State FLORIDA					24. Zip Code			
Miami		MIAMI-D/	ADE	74.75		FL	URIDA		33145)		
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				26. Signature of Candidate								
2/01/19				X Som The								
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
ı,CARLOS M. TRUEBA				, do hereby accept the appointment								
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
2/01/19 X												
Date)			Sign	nature of	f Campaig	gn Treasure	r or Depu	ty Treasur	er		

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2019 FEB - I PM 1:31

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

NOTE: This form must be on file with the qualifying

officer perore opening th	e campa	ign account.							OFFICI	E 03E	CINET	
1. CHECK APPROPRIATE Initial Filing of Form		5): -filing to Change	т П	reasure	er/Depu	uty 🖂	Deposito	-v П	Office		Party	
										ERSON IN SECURE		
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip							
JUAN C.`ZAPATA					code)							
4. Telephone	5. E-mail address				PO BOX #527623 MIAMI, FL 33152							
(305) 529-5440	cpazos	cpazos@gemrtcpa.com										
6. Office sought (include district, circuit, group number)						7. If a candidate for a <u>nonpartisan</u> office, check if						
MIAMI-DADE COUNTY MAYOR					applicable:							
WITH BABE GOOTT WINTER					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												
CONNIE M. PAZOS												
11. Mailing Address 12. Telephone												
2600 DOUGLAS ROAD, SUITE 800 (305) 529-5440												
13. City 14. County 15. State					e 16. Zip Code 17. E-mail address							
CORAL GABLES MIAMI-DADE FLORID					DA 33134 CPAZOS@GEMRTCPA.COM							
18. I have designated the following bank as my												
19. Name of Bank					20. Address							
BankUnited	2159	159 Coral Way										
21. City	1. City 22. County				23	3. State			24. Zip Code			
Miami	mi MIAMI-DADE						33145					
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.										ER AND		
25. Date 26. Signature of Candidate												
02/01/19	X	X John July										
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I, CONNIE M. PAZOS , do hereby accept the appointment												
(Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
								r or Depu	ity Troopius	or		
Date	Signal	Signature of Campaign Treasurer or Deputy Treasurer										