

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

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

(PLEASE PRINT OR TYPE)

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2022 JUN 13 AM 9:52
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)

Christopher Carbonelli

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

6400 SW 71 CT Miami FL 33143

4. Telephone

(3) 753-3243

5. E-mail address

Chris car 487@gmail.com

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

Miami-Dade Community Council
Area 12 Sub area 122

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

Christopher Carbonelli

11. Mailing Address

6400 SW 71 CT Miami FL, 33143

12. Telephone

(3) 753-3243

13. City

Miami

14. County

Dade

15. State

FL

16. Zip Code

33143

17. E-mail address

Chris car 487@gmail.com

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

19. Name of Bank

First Horizon Bank

20. Address

3275 NW 87 Ave

21. City

Doral

22. County

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

13-06-22

26. Signature of Candidate

X 

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

I, Christopher Carbonelli, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

13-06-22

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer