APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN	RECEIVED
DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	LUIT RPR 25 ANA
(PLEASE PRINT OR TYPE)	OFFICE OF THE CITY CLERK
NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip	
HUBERTO LLANES	^{code)} 48 NW 58 CT
4. Telephone 5. E-mail address	MIAMI, FL 33126
(786)804-1700 LLANESH4 (p) GMAIL.com	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Mayor-city of Miam.	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	
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer HUBERTO LLANES	
11. Mailing Address 48 NW 58 CT (786) 804-1700	
13. City Miami 14. County 15. Sta Miami Dade FL	ate 16. Zip Code 17. E-mail address
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank Wells fargo 20. Address 900 SW 57 ^{+H} are Miami Fl 33144	
21. City Mani 22. County Mani Dade	23. State <i>FL</i> 23. <i>State</i> <i>24. Zip Code</i> <i>33/44</i>
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 april 25 th 2017	26. Signature of Candidate
27. Treasurer's Acceptance of Appointment (fill in the stanks and check the appropriate block)	
I, HUBERTO LLANES , do hereby accept the appointment	
(Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer	
april 25# 2017 X	
Date Signature of Campaign Treasurer or Deputy Treasurer	

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