## **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.									OFFIC	E USE ONLY		
1. CHECK APPROPRIATE BOX(ES):												
2. Name of Candidate (in this order: First, Middle, Last)					Address (include post office box or street, city, state, zip code)							
Melissa Castro					888 S. Douglas Rd. PH4							
4. Telephone	ohone 5. E-mail address				Coral Gables, Florida 33134							
( 786 )567-2614						*						
6. Office sought (include district, circuit, group number)  7. If a candidate for a <u>nonpartisan</u> office, check if												
City of Coral Gables, Commissioner Group IV  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 X No Party Affiliation ☐Party candidate.												
9. I have appointed the following person to act as my X Campaign Treasurer Deputy Treasurer												
10. Name of Treasurer or Deputy Treasurer												
Monica Arevalo 11. Mailing Address 12. Telephone												
11. Mailing Address 12. Telephone 7502 NW 112th Path (561)945 2080												
13. City	14. County		15. Sta									
Doral	Doral Miami-Dade I			_ 33178 monicaarevalo14@hotmail.com								
18. I have designated the following bank as my												
19. Name of Bank PNC Bank					20. Address 2728 Ponce de Leon Blvd							
21. City					:	23. State			24. Zip Code			
Coral Gables	al Gables Miami-Dade				FL				3313	34		
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							
02-24-23 x						x many						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I,, do hereo, accept the appointment  (Please Print or Type Name)												
designated above as: X Campaign Treasurer.												
Date  X Y Signature of Campaign Treasurer or Deputy Treasurer												
Signature of Campaign Treasurer of Deputy Treasurer												