

**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.

CITY OF CORAL GABLES
RECEIVED BY THE
OFFICE OF THE CITY CLERK

2020 JAN 17 AM 9:43

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)

JAVIER BANOS

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

1801 CASILLA ST
CORAL GABLES, FL 33134

4. Telephone

(305) 519-5581

5. E-mail address

JBANOS@MSN.COM

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

CITY OF CORAL GABLES COMMISSION GROUP III

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

JAVIER BANOS

11. Mailing Address

3126 CORAL WAY

12. Telephone

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13. City

MIAMI

14. County

MIAMI DADE

15. State

FL

16. Zip Code

33145

17. E-mail address

JBANOS@MSN.COM

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

19. Name of Bank

City National Bank of Florida

20. Address

2855 S Le Jeune Rd

21. City

CORAL GABLES

22. County

MIAMI DADE

23. State

FLORIDA

24. Zip Code

33134

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

01/16/2020

26. Signature of Candidate

X

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

I, JAVIER BANOS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

01/16/2020

Date

X

Signature of Campaign Treasurer or Deputy Treasurer