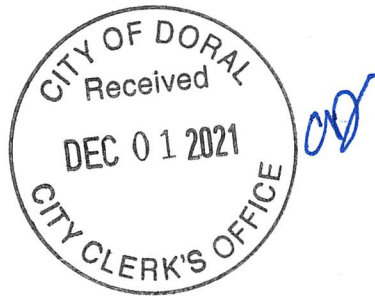


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(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.**

**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)

JUAN CARLOS ESQUIVEL

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

9845 N.W. 25TH TERRACE  
DORAL FLORIDA 33172

**4. Telephone**

(786 ) 647-8500

**5. E-mail address**

jc@jcesquivelfordoral.com

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

DORAL CITY COUNCIL SEAT No. 4

**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**

JUAN CARLOS ESQUIVEL

**11. Mailing Address**

9845 N.W. 25TH TERRACE

**12. Telephone**

( 786 ) 647-8500

**13. City**

DORAL

**14. County**

MIAMI-DADE

**15. State**

FL

**16. Zip Code**

33172

**17. E-mail address**

jc@jcesquivelfordoral.com

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

**19. Name of Bank**

WELLS FARGO BANK N.A.

**20. Address**

8301 N.W. 36TH STREET

**21. City**

DORAL

**22. County**

MIAMI-DADE

**23. State**

FLORIDA

**24. Zip Code**

33166

**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**

DECEMBER 1ST, 2021

**26. Signature of Candidate**

**X**

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

I, JUAN CARLOS ESQUIVEL, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer

DECEMBER, 1ST, 2021

Date

**X**

Signature of Campaign Treasurer or Deputy Treasurer