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.

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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)
Armando R Ramirez

3. Address (include post office box or street, city, state, zip code)
P.O. Box 451052 Kissimmee, FL. 34745

4. Telephone
(321) 333-2239

5. E-mail address
Armandoroido@yahoo.com

6. Office sought (include district, circuit, group number)
Clerk of Circuit Court Osceola County

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   ☒ Democratic _____ Party candidate.

9. I have appointed the following person to act as my ☒ Campaign Treasurer   ☐ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer
John R. Ramirez

11. Mailing Address
P.O. Box 451052,

12. Telephone
(407) 929-6094

13. City Kissimmee   **14. County** Osceola   **15. State** FL   **16. Zip Code** 34745   **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
1473 Osceola Parkway

21. City Kissimmee   **22. County** Osceola   **23. State** Florida   **24. Zip Code** 34744

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 January 28, 2019

26. Signature of Candidate
X

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

I, John J. Ramirez _____, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer   ☐ Deputy Treasurer.

January 28, 2019   X _____
Date   Signature of Campaign Treasurer or Deputy Treasurer

DS-DE 9 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.