APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

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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):														
✓ Initial Filing of Form	Re	-filing to Change:		Γreas	surer/l	Deputy		Deposito	ry 🔲	Office		Party		
2. Name of Candidate (in this order: First, Middle, Last)					3. Address (include post office box or street, city, state, zip									
Victor J. Rivera					code) 4202 Needle Palm Court, St. Cloud, FL 34772									
4. Telephone	5. E-mail address				7202 Necdic Faim Godit, Gt. Gloda, FE 34772									
(407) 579-1176	vjrt222@gmail.com													
6. Office sought (include district, circuit, group number)						7. If a candidate for a <u>nonpartisan</u> office, check if								
St. Cloud City Council Member Seat #3					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														
9. I have appointed the following person to act as my														
10. Name of Treasurer or Deputy Treasurer Victor J. Rivera														
11. Mailing Address						12. Telephone								
4202 Needle Palm Court, St. Cloud, FL 34772					(407) 579-1176									
3. City 14. County 15. S				ate	ate 16. Zip Code 17. E-mail address									
St. Cloud		Osceola FL		-	34772 vjrt222@gmail.com									
18. I have designated the following bank as my														
19. Name of Bank Chase Bank					20. Address 4355 13th St, Saint Cloud, FL 34769									
21. City		22. County				23. Sta	ite			24. Zip C	ode			
St. Cloud Osceola			a 			FL				34769				
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 7/19/21					26. Signature of Candidate									
					X DAL									
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)														
ı,Victor J. Rivera					, do hereby accept the appointment									
(Please Print or Type Name)														
designated above as:	\checkmark	Campaign T	reasure) r		Deputy	Trea	asurer.						
7/19/21 X Parli														
Date Signature of Campaign Treasurer or Deputy Treasurer														