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.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
Initial Filing of Form Re-filing to Change: T	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip code)
4. Telephone 5. E-mail address	712 W Colombie Ave
4. Telephone 5. E-mail address	Kissimmee, FL, 3474/
(407) 785-0617 varez sed Q 10100d	·
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Kissimmer	applicable: My intent is to run as a Write-In candidate.
City Commission office shock block and fill in name of party as applicable: My intent is to run as a virite-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 AffiliationParty candidate.	
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer	
CARIOS ALVAREZ IT	40 Telembone
11. Mailing Address	12. Telephone
712 W Columbia Ave (407)185-0617	
712 W Columbia Ave (407)185-0617 13. City 14. County 15. State 16. Zip Code 17. E-mail address Kissimmee Osceola E 3474/ Varez3-Selcloud.com	
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank 20. Address	
	349 W. OAK ST 23. State 24. Zip Code
Southstate BANK 21. City 22. County Kissimmer Osceola	23. State 24. Zip Code
Kissimmer Osceola	F1 3474/
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
5/21/23	X CA
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
1, CTARIOS AVAREZ	, do hereby accept the appointment
(Please Print or Type Name)	, do neleby accept the appointment
designated above as: Campaign Treasurer Deputy Treasurer.	
5/26/23 X	c to
Date	Signature of Campaign Treasurer or Deputy Treasurer