

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

SUPERVISOR OF ELECTIONS

2023 MAR -8 AM 11:28

PALM BEACH COUNTY, FL

I, LAURO E. DIAZ,

candidate for the office of SHERIFF;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X 
Signature of Candidate

03-08-2023
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

**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 filing officer before opening the campaign account.

SUPERVISOR OF ELECTIONS

2024 JUN 12 AM 11:50

PALM BEACH COUNTY, FL

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):
(Please Print or Type Name)

3. Address (include PO Box or Street, City, State, Zip Code):

§119.071(4)(d)2.a

LAURO ERNESTO DIAZ

4. Telephone:

§119.071(4)(d)2.a

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

LDIAZ2489@YAHOO.COM

7. Office Sought (include district, circuit, group, or seat #):

8. If a candidate for a nonpartisan office, check the box if applicable:

☐ I intend to run as a Write-In Candidate.

SHERIFF PALM BEACH COUNTY

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☒ *REPUBLICAN* Party candidate.

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

11. Name of Treasurer or Deputy Treasurer:

12. Telephone:

§119.071(4)(d)2.a

13. Email Address:

LDIAZ2489@YAHOO.COM

14. Mailing Address:

§119.071(4)(d)2.a

15. City:

§119.071(4)(d)2.a

16. State:

§119.071(4)(d)2.a

17. Zip Code:

§119.071(4)(d)2.a

18. I have designated the following bank as my (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

19. Name of Bank:

TRUIST

20. Address:

1870 FORESTHILL BLV.

21. City:

WEST PALM BEACH

22. County:

PALM BEACH

23. State:

FL.

24. Zip Code:

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

06-12-2024

26. Signature of Candidate:

X [Signature]

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

I, _____ do hereby accept the appointment designated above as:
(Please Print or Type Name)

☐ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date:

06-12-2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X [Signature]

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2023 MAR -8 AM 11:28

PALM BEACH COUNTY, FL

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)

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

LAURO ERNESTO DIAZ

4. Telephone
§119.071(4)(d)2.a

5. E-mail address

LDiaz2459@yahoo.com

§119.071(4)(d)2.a

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

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 ☒ REPUBLICAN Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Laurence Montello

11. Mailing Address

49 Via Verona

12. Telephone

(561) 222 3305

13. City

Palm Beach Gardens

14. County

Palm Beach

15. State

FL

16. Zip Code

33418

17. E-mail address

lauro@montellowealth.com

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

19. Name of Bank

Trust Bank

20. Address

5733 Okeechobee Blvd West

21. City

West Palm Beach

22. County

Palm Beach County

23. State

FL

24. Zip Code

33417

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

03-08-2023

26. Signature of Candidate

X 

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

I, Laurence Montello, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

3-8-23

Date

X


Signature of Campaign Treasurer or Deputy Treasurer