

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

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

(PLEASE PRINT OR TYPE)

12-08-16P04:36 RCVD



**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)  
Santiago Avila, Jr.

**3. Address** (include post office box or street, city, state, zip code)  
Post Office Box 390311 Deltona, FL 32739

**4. Telephone**  
(407 ) 504-0488

**5. E-mail address**  
santiago@santiagoavilajr.com

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

**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 SAJ Party candidate.  
 Write-In     No Party Affiliation     \_\_\_\_\_

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

**10. Name of Treasurer or Deputy Treasurer**  
Irma M. Arteaga

**11. Mailing Address**  
PO Box 6255

**12. Telephone**  
( )

**13. City**  
Deltona

**14. County**  
Volusia

**15. State**  
FL

**16. Zip Code**  
32728

**17. E-mail address**  
irma@santiagoavilajr.com

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

**19. Name of Bank**  
Bank of America

**20. Address**  
1241 E Normandy Blvd

**21. City**  
Deltona

**22. County**  
Volusia

**23. State**  
FL

**24. Zip Code**  
32725

**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**  
12/08/2016

**26. Signature of Candidate**

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

I, Irma M Arteaga, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

12/8/2016  
Date

Signature of Campaign Treasurer or Deputy Treasurer