

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

JAN30'19 12:04PM

(PLEASE PRINT OR TYPE)

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)

Fernando Godo

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

2390 W 12 Ave. Apt. B-9
Hialeah, Fl. 33010

4. Telephone

(786) 556-4148

5. E-mail address

jacintodescalzo64@yahoo.es

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

City Council Seat # 2

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 _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Fernando Godo

11. Mailing Address

2390 W 12 Ave. Apt. B-9

12. Telephone

(786) 556-4148

13. City

Hialeah

14. County

Miami-Dade

15. State

Fl.

16. Zip Code

33010

17. E-mail address

jacintodescalzo64@yahoo.es

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

19. Name of Bank

TD Bank

20. Address

801 W 49 Street

21. City

Hialeah

22. County

Miami-Dade

23. State

Fl.

24. Zip Code

33012

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

1/30/2019

26. Signature of Candidate

X



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

I, Fernando Godo, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1/30/2019

Date

X


Signature of Campaign Treasurer or Deputy Treasurer

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

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

(PLEASE PRINT OR TYPE)

JUL3019 12:25PM

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)

Fernando Gorb

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

4271 W 18CT Hialeah FL 33012

4. Telephone

(786) 556 4118

5. E-mail address

jacinto.devalgo@cityofhialeah.com

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

City Council Group #2

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 _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Fernando Gorb

07/19/2019

11. Mailing Address

4271 W 18CT

12. Telephone

()

13. City

Hialeah

14. County

DADE

15. State

FL

16. Zip Code

33012

17. E-mail address

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

19. Name of Bank

1 First Bank

20. Address

1325 W 49 ST

21. City

Hialeah

22. County

DADE

23. State

FL

24. Zip Code

33012

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

07/30/2019

26. Signature of Candidate

X *FG*

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

I, Fernando Gorb, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

07/30/2019

Date

X

Signature of Campaign Treasurer or Deputy Treasurer