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

07-12-24 P12:00 IN

opening the campaign account.					OFFICE USE ONLY					
1. CHECK APPROPRIATE BOX	K(ES):									
■ Initial Filing of Form □ Re	-filing to Change:	Treasure	urer/Deputy Depo			Office	e 🗌 Party			
2. Name of Candidate (in this order: First, Middle, Last):				3. Address (include PO Box or Street, City, State, Zip Code):						
(Please Print or Type Name) Kristopher Miguel Cruzada			, Winter Park, FL 32792							
Tanologijo Magaor Grazada										
e e										
4. Telephone:	5. Candidate's Voter	tion #: 6. Email Address:								
	107705265	fring purpose	kristopher_cruzada@icloud.com							
7. Office Sought (include distric	(not required for qualifying purposes ffice Sought (include district, circuit, group, or seat #):				8. If a candidate for a <u>nonpartisan</u> office, check the box					
if applicable:										
Winter Park City Commission, Seat 3										
9. If a candidate for <u>partisan</u> 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 Candid	date.	_				_ 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: 13. Email Addres				Address:			
Lito Valdivia	(321)474-72			valdivial@msn.com						
14. Mailing Address:		15. City:			16. State:		17. Zip Code:			
630 Martin Ave		Altamonte S		Springs	ıs FL		32701			
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository										
19. Name of Bank:	20. Address: 5830 Red Bug Lake Road									
Regions Bank 21. City:						tate:	24. Zip Code:			
Winter Springs		Seminole		FL		iato.	32708			
UNDER PENALTIES OF PERJ		I HAVE REA	AD TH				DINTMENT OF THE			
CAMPAIGN TREASURER AND I	DESIGNATION OF THE C	- Territory or		ignalure of C			TED IN IT ARE TRUE.			
25. Date: July 12, 2024			X Watch M Cel							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)										
I, Lito Valdiviado hereby accept the appointment designated above as:										
(Please Print o	or Type Name)									
Campaign Treasurer.			☐ Deputy Treasurer.							
28. Date: 07/12/	29. Signature of Campaign Treasurer or Deputy Treasurer									
1 1 24			X	HATE	_					
DC DE 0 (D 00/02)			1			D.	1 40 0 0004 5 4 0			

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

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07-1 -24 P12:00 1 .

opening the campaign account.					OFFICE USE ONLY					
1. CHECK APPROPRIATE BOX	K(ES):									
■ Initial Filing of Form □ Re	-filing to Change:	Treasurer/[Depu	ty 🗆 De	pository	☐ Office	e 🗆 Party			
2. Name of Candidate (in this order: First, Middle, Last):				3. Address (include PO Box or Street, City, State, Zip Code):						
(Please Print or Type Name) Kristopher Miguel Cruzada			Winter Park, FL 32792							
J										
4. Telephone:	5. Candidate's Voter	Registration	#: 6. Email Address:							
	107705265 (not required for qualif	vina purposes)	kristopher_cruzada@icloud.com							
7. Office Sought (include district, circuit, group, or seat #):				8. If a candidate for a <u>nonpartisan</u> office, check the box						
Winter Park City Commission, Seat 3 if applicable:										
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. ☐										
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer										
11. Name of Treasurer or Deputy Treasurer:			12. Telephone:			13. Email Address:				
Shelby Peck			(407) 492-1116			shelbypeck6@gmail.com				
14. Mailing Address:		15. City:			16. State:		17. Zip Code:			
1321 Lyndale Blvd		Winter Park		Florid		а	32789			
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository										
19. Name of Bank:			20. Address:							
Regions Bank 21. City: 22. Co			5830 Red Bug Lake Road unty: 23. State: 24. Zip Code:							
Winter Springs		Seminole		FL			32708			
UNDER PENALTIES OF PERJ	URY, I DECLARE THAT	I HAVE READ	THE	FOREGOING	FORM F	OR THE APPO	DINTMENT OF THE			
CAMPAIGN TREASURER AND I	DESIGNATION OF THE C		_				TED IN IT ARE TRUE.			
25. Date: July 12, 2024				X Ass. M.L.						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)										
Chr. OV Prate										
I, SHELBY PECK do hereby accept the appointment designated above as: (Please Print or Type Name)							nated above as:			
☐ Campaign Treasurer.				Deputy Treasurer.						
,		29). S	ignature of C	ampaig	n Treasurer	or Deputy Treasurer			
28. Date: 01/2/2014			X.							
DS-DE 9 (Rev. 09/23)						Ri	Te 15-2 0001 FAC			