

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

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

16-07-12 15:15 RCVD

JOY

(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)

Christopher Manuel Alcantara

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

*574 Giralda Ave.
Deltona, FL 32725*

4. Telephone

(347) 515-0427

5. E-mail address

calcantam@stetson.edu

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

City of Deltona Commission, Dist. 4

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

Christopher M. Alcantara

11. Mailing Address

574 Giralda Ave.

12. Telephone

(347) 515-0427

13. City

Deltona

14. County

Volusia

15. State

FL

16. Zip Code

32725

17. E-mail address

calcantam@stetson.edu

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

07-12-16

26. Signature of Candidate

X [Signature]

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

I, *Christopher M. Alcantara*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

07-12-16

Date

X [Signature]

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)

06-05-15 P03:41 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)

Christopher M. Alcántara

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

574 Giralda Ave.
Deltona, FL 32725

4. Telephone

(347) 515-0427

5. E-mail address

colcanta@stetson.edu

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

City of Deltona Commission,
District 4

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

Carina Alcántara

11. Mailing Address

574 Giralda Ave

12. Telephone

(917) 971-8572

13. City

Deltona

14. County

Volusia

15. State

FL

16. Zip Code

32725

17. E-mail address

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

Florida

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

06-05-2015

26. Signature of Candidate

X

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

I, Carina Alcántara, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

06-05-2015
Date

X Carina Alcántara
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

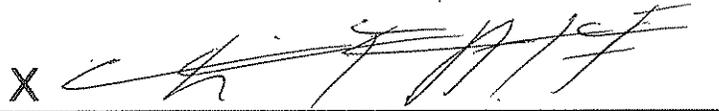
06-05-15 P05:42 RCVD



I, Christopher M. Alcántara

candidate for the office of Deltona Commission, District 4;

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

X 

Signature of Candidate

06-05-2015

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).