

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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CNMB CITY CLERK'S OFFICE


I, FRANTZ PIERRE,

candidate for the office of N. MIAMI BEACH CITY COUNCIL Grp 5

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



Signature of Candidate

02/10/2015

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).

**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 qualifying officer before opening the campaign account.

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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)

FRANTZ PIERRE

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

2120 N.E. 171 Street
N. MIAMI BEACH, FL.
33162

4. Telephone

(786) 447-0939

5. E-mail address

FrantzPierre007@gmail.com

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

North Miami Beach City Council - Group 5

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

FRANTZ PIERRE

11. Mailing Address

2120 N.E. 171 ST.

12. Telephone

786 447-0939

13. City

N. M. B.

14. County

MIAMI-DADE

15. State

FL

16. Zip Code

33162

17. E-mail address

see #5

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

19. Name of Bank

BANK OF AMERICA

20. Address

18201 N.E. 19th Avenue

21. City

N. MIAMI BEACH

22. County

MIAMI-DADE

23. State

FLORIDA

24. Zip Code

33162

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

02/10/2015

26. Signature of Candidate


X 

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

I, FRANTZ PIERRE, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

02/10/2015
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer