

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

RECEIVED

FEB 09, 2024


Town Clerk's Office

I, JOHN STEVEN GARATE,

candidate for the office of COUNCIL MEMBER DISTRICT 3 SOUTHWEST RANCHES FL ;

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

X


Signature of Candidate

02-09-2024

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 filing 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):
(Please Print or Type Name)

JOHN STEVEN GARATE

3. Address (include PO Box or Street, City, State, Zip Code):

5901 S.W. 162ND AVENUE
SOUTHWEST RANCHES FL 33331

4. Telephone:

(786) 346-1687

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

AUTOSTARCREDITCORP@GMAIL.COM

7. Office Sought (include district, circuit, group, or seat #):

TOWN OF SOUTHWEST RANCHES DISTRICT 3 COUNCIL MEMBER

8. If a candidate for a nonpartisan office, check the box if applicable:

☐ I intend to run as a Write-In Candidate.

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. ☐ _____ Party candidate.

10. I have appointed the following person to act as my:

☒ Campaign Treasurer

☒ Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

JOHN STEVEN GARATE

12. Telephone:

(786) 346-1687

13. Email Address:

AUTOSTARCREDITCORP@GMAIL.COM

14. Mailing Address:

5901 SW 162ND AVENUE

15. City:

SOUTHWEST RANCHES

16. State:

FL

17. Zip Code:

33331

18. I have designated the following bank as my (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

19. Name of Bank:

CHASE BANK

20. Address:

4501 WESTON ROAD

21. City:

WESTON

22. County:

BROWARD

23. State:

FLORIDA

24. Zip Code:

33331

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date: 02-09-2024

26. Signature of Candidate:

X

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

I, JOHN STEVEN GARATE do hereby accept the appointment designated above as:
(Please Print or Type Name)

☒ Campaign Treasurer.

☒ Deputy Treasurer.

28. Date: 02-09-2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X