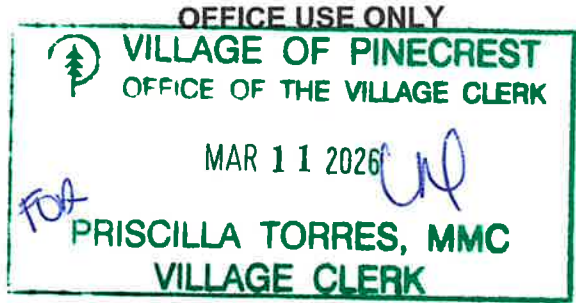


# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)



I, James Suarez,

candidate for the office of Council Member Seat 4;

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

X

Signature of Candidate

3/10/2026

Date

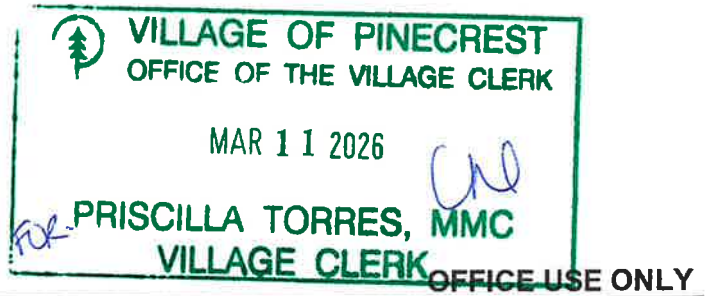
Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result 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.



**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)

James Suarez

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

13550 SW 70 Avenue  
Pinecrest, FL 33156

**4. Telephone:**

(305) 720-7201

**5. Candidate's Voter Registration #:**

(not required for qualifying purposes)

**6. Email Address:**

JamesSuarez@aol.com

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

Council Member seat 4

**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:**

James Suarez

**12. Telephone:**

(305) 720-7201

**13. Email Address:**

JamesSuarez@aol.com

**14. Mailing Address:**

13550 SW 70 Avenue

**15. City:**

Pinecrest

**16. State:**

FL

**17. Zip Code:**

33156

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

**19. Name of Bank:**

City National Bank

**20. Address:**

11675 S. Dixie Highway

**21. City:**

Pinecrest

**22. County:**

Miami Dade

**23. State:**

FL

**24. Zip Code:**

33156

**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:**

3/10/2026

**26. Signature of Candidate:**

X

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

I, James Suarez do hereby accept the appointment designated above as:  
(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

**28. Date:**

3/10/2026

**29. Signature of Campaign Treasurer or Deputy Treasurer**

X

**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.



**VILLAGE OF PINECREST  
OFFICE OF THE VILLAGE CLERK**

MAR 11 2026

PRISCILLA TORRES, MMC  
VILLAGE CLERK

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):  
(Please Print or Type Name)

James Suarez

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

13550 SW 70th Avenue  
Pinecrest, FL 33156

**4. Telephone:**

(305) 720-7201

**5. Candidate's Voter Registration #:**

(not required for qualifying purposes)

**6. Email Address:**

Jamessuar@aol.com

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

Council Member Seat 4

**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:**

Rebecca Suarez

**12. Telephone:**

(786) 512-7030

**13. Email Address:**

rsuarez41@yahoo.com

**14. Mailing Address:**

13550 SW 70th Avenue

**15. City:**

Pinecrest

**16. State:**

FL

**17. Zip Code:**

33156

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

**19. Name of Bank:**

City National Bank

**20. Address:**

11675 S. Dixie Highway

**21. City:**

Pinecrest

**22. County:**

Miami-Dade

**23. State:**

FL

**24. Zip Code:**

33156

**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:**

3/10/2026

**26. Signature of Candidate:**

X

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

I, Rebecca Suarez

(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

**28. Date:**

3-10-26

**29. Signature of Campaign Treasurer or Deputy Treasurer**

X