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

RECEIVED Feb i AVZ 2013 JAN 32 AM 11: 12

> MIAMI-DADE ELECTIONS

officer before opening the campaign account. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: Treasurer/Deputy Depository Office Party 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip code) MARTA PEREZ 1208 AGUILA AVENUE 4. Telephone 5. E-mail address CORAL GABLES, FL 33134 (786) 426-8430 N/A 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: MIAMI DADE COUNTY SCHOOL BOARD, DISTRICT 8 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 JOSE A. RIESCO, CPA 11. Mailing Address 12. Telephone 95 MERRICK WAY, SUITE 250 (305) 445-0777 13. City 14. County 15. State 16. Zip Code 17. E-mail address **CORAL GABLES** 33134 MIAMI-DADE FL jose@riescoandcompany.com 18. I have designated the following bank as my \boxtimes Primary Depository Secondary Depository 19. Name of Bank 20. Address BANK OF CORAL GABLES 2295 GALIANO STREET 21. City 22. County 23. State 24. Zip Code CORAL GABLES MIAMI-DADE FL 33134 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 26. Signature of Candidate Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. JOSE A. RIESCO, CPA , do hereby accept the appointment (Please Print or Type Name) designated above as: |X|Campaign Treasurer Deputy Treasurer 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)

NOTE: This form must be on file with the qualifying

RECEIVED
Feb 1 AVE
2013 JAN 32 AM 11: 12

MIAMI-DADE ELECTIONS

| officer before opening the campaign account. | OFFICE USE ONLY | | | | | | |
|--|---|--|--|--|--|--|--|
| 1. CHECK APPROPRIATE BOX(ES): | | | | | | | |
| | reasurer/Deputy Depository Office Party | | | | | | |
| 2. Name of Candidate (in this order: First, Middle, Last) | 3. Address (include post office box or street, city, state, zip | | | | | | |
| MARTA PEREZ | code) 1208 AGUILA AVENUE | | | | | | |
| 4. Telephone 5. E-mail address | CORAL GABLES, FL 33134 | | | | | | |
| (786) 426-8430 N/A | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| 6. Office sought (include district, circuit, group number) | 7. If a candidate for a nonpartisan office, check if | | | | | | |
| MIAMI DADE COUNTY SCHOOL BOARD, DISTRICT 8 applicable: My intent is to run as a Write-In candidate. | | | | | | | |
| 8. If a candidate for a <u>partisan</u> 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 MARTA PEREZ | | | | | | | |
| 11. Mailing Address | 12. Telephone | | | | | | |
| 1208 AGUILA AVENUE | (786) 426-8430 | | | | | | |
| 13. City 14. County 15. Sta | ate 16. Zip Code 17. E-mail address | | | | | | |
| CORAL GABLES MIAMI-DADE FL | 33134 N/A | | | | | | |
| 18. I have designated the following bank as my 🔀 Primary Depository 🔲 Secondary Depository | | | | | | | |
| 19. Name of Bank | 20. Address | | | | | | |
| BANK OF CORAL GABLES | 2295 GALIANO STREET | | | | | | |
| 21. City 22. County | 23. State 24. Zip Code | | | | | | |
| CORAL GABLES MIAMI-DADE | FL 33134 | | | | | | |
| 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 26. Signature of Candidate | | | | | | | |
| 1/25/13 X Marta Lee | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | |
| I, MARTA PEREZ , do hereby accept the appointment | | | | | | | |
| (Please Print or Type Name) | | | | | | | |
| designated above as: Campaign Treasurer Deputy Treasurer. | | | | | | | |
| 1/25/13 X Marta Ker | | | | | | | |
| / Date | Shapature 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)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

RECEIVED
Feb | AVZ
2013 JAN 32 AM 11: 12

MIAMI-DADE ELECTIONS

OFFICE LISE ONLY

| officer before opening th | e campa | ign account. | | | | | | OFFICE | USE | ONLY |
|--|----------------------------------|-------------------|----------|--------------------------------|---|--------------|------------------|---------------|---------|------|
| 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party | | | | | | | Party | | | |
| 2. Name of Candidate (in this order: First, Middle, Last) | | | | 3. A | ddress (includ | de post offi | ce box or | street, city, | state, | zip |
| MARTA PEREZ | | | | code) | | | | | | |
| 4. Telephone 5. E-mail address | | | | 8 AGUILA / RAL GABLI | | | | | | |
| (786) 426-8430 | N/A | | | 00. | VIL OVIDE | 20,12 00 | 7104 | | | |
| 6. Office sought (include of | district, ci | rcuit, group numl | ber) | | 7. If a cand | didate for | a <u>nonpart</u> | isan office | , chec | k if |
| MIAMI DADE COUNTY SCHOOL BOARD, DISTRICT | | | | CT 8 | T 8 applicable: My intent is to run as a Write-In candidate. | | | | | |
| 8. If a candidate for a par | tisan off | ice, check block | and fill | in nam | e of party as | applicable | : My int | ent is to run | asa | |
| Write-In No | Party Aff | liation 🔲 | | | | | Pa | irty cand | lidate. | |
| 9. I have appointed the fo | llowing | person to act as | my | Ca | mpaign Trea | surer 🔀 | Deput | ty Treasure | r | |
| 10. Name of Treasurer or D JEANNINE R. MIRAND | | easurer | | | | | | | | |
| 11. Mailing Address | | | | | | | 12. Tele | phone | | |
| 95 MERRICK WAY, SU | JITE 25 | 0 | | | | | (305) | 445-077 | 7 | |
| 13. City | | ounty | 15. Stat | | 16. Zip Code 17. E-mail address | | | | | |
| CORAL GABLES MIAMI-DADE FL | | | 33 | 33134 jen@riescoandcompany.com | | | | | | |
| 18. I have designated the | followin | g bank as my | \times | Prim | ary Depositor | ry 🔲 | Seconda | ry Deposito | ory | |
| 19. Name of Bank | | | | 20. Add | | | | | | |
| BANK OF CORAL GAE | BLES | | 2 | 2295 C | SALIANO S | TREET | | | | |
| 21. City CORAL GABLES | | 22. County | - | | 23. State | | | 24. Zip Code | | |
| | CORAL GABLES MIAMI-DADE FL 33134 | | | | | | | | | |
| 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 26. Signature of Candidate | | | | | | | | | | |
| 1/25/13 X Marta Ker | | | | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | |
| I,, do hereby accept the appointment | | | | | | | | | | |
| (Please Print or Type Name) | | | | | | | | | | |
| designated above as: ☐ Campaign Treasurer ☑ Deputy Treasurer. ← | | | | | | | | | | |
| X Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | | | | |
| Date | | | | ndnatiii | e of Campair | in Treasure | er or Denu | IV I reastire | r | |

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

2013 JAN 32 AM 11: 12

MIAMI-DADE ELECTIONS

| ١, | MA | RT | AP | ER | EZ |
|----|----|----|----|----|----|
|----|----|----|----|----|----|

candidate for the office of MIAMI DADE COUNTY SCHOOL BOARD, DISTRICT 8; have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

Signature of Candidate

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).



Access to Handbook and the Election Laws of the State of Florida 2013 JAN 32 AM 11: 12

RECEIVED

| Candidate/Chairperson: | MIAMI-DADE ELECTIONS | | | |
|------------------------|-------------------------|-----------|--|--|
| MARTA | | PEREZ | | |
| First Name | Middle Name | Last Name | | |

MIAMI DADE COUNTY SCHOOL BOARD, DISTRICT 8

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade **County Elections Department Website:**

Candidate Qualifying Handbook (http://www.miamidade.gov/elections/candidate.asp)

| Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes. | | | | | | |
|---|--|--|--|--|--|--|
| Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes. | | | | | | |
| Acknowledged by: Marta Candidate / Chairperson Signature | | | | | | |
| Date: | | | | | | |
| Primary Telephone Number: 786-426-8430 | | | | | | |
| Alternate Telephone Number: | | | | | | |
| E-mail address: MARTA774@BELLSOUTH.NET | | | | | | |

Campaign Treasurer's Report Electronic Filing Requirements for Miami-Dade County



| | × | | | MAMI-DAD |
|-----------|---|---|------------------|--|
| | Candidate (office sought): | MI DADE COUNT | Y SCHOOL BO | DARD, DISTRICTIES |
| | Candidate's Florida Voter Regis | tration Number: _ | | |
| | ☐ Political Committee: | | X | |
| | ☐ Party Executive Committee: | | - Intervention I | 19-01-010-01-01-0-0-0-0-0-0-0-0-0-0-0-0- |
| | Other: | : | The Same Colonia | |
| l, und | MARTA PEREZ (Please print) nderstand that Campaign Treasur | t name of Candidate or Cha er's Reports <u>mus</u> t | | ronically in order to |
| cor | omply with Miami-Dade County rec | quirements. | | |
| Mia | dditionally, a hard copy of the Can liami-Dade County Elections Dep eadline with original signatures. | | | |
| | Marta Rey | | | 1/25/13. |
| | Signature of Candidate | r Chairperson | | Date |
| Da | ay Time Telephone No: 786-4 | 26-8430 | ni | : |
| Em | mail Address: MARTA774 | @BELLSC | UTH.NE | Т |
| | | | | |

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.