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

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MIAMI-DADE ELECTIONS

officer before opening the campaign account.								OFFICE	USE	ONLY	
1. CHECK APPROPRIATE	100		. — -		/D.a		1 0		0#:		D- 4
	Re	-filing to Change:	ا <u>ا</u> لـا :	reasu	urer/Dep	uty	Deposito	ry 📙	Office		Party
2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip						zip					
WILLIAM IRA ALTFIELD			code) 1351 NW 12th STREET #505								
4. Telephone	5. E-mail address			MIAMI, FLORIDA 33125							
(3)		field@gmail.com									
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if						k if					
MIAMI-DADE, COUNTY COURT JUDGE			applicable:								
GROUP 13 My intent is to run as a Write-In candidate						idate.					
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 I	Party Aff	iliation	-					Pa	rty cand	didate.	
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer											
10. Name of Treasurer or Deputy Treasurer TOMAS F. GAMBA											
11. Mailing Address 12. Telephone											
2701 Ponce De Leon Blvd (305) 448-4010											
13. City 14. County 15. State			4000 C								
Coral Gables Miami-Dade Fla.		33134 tfg@gambalombana.com									
18. I have designated the following bank as my											
19. Name of Bank 20. Address											
Sabadell United Bank 1111 Brickell Avenue											
21. City		22. County				3. State			24. Zip Co	ode	
Miami		Miami-Dade			FI	la.			33131		
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											
2/06/2013 X Hill Mit											
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I, IOMAS F. GAMBA , do hereby accept the appointment											
(Please Print or Type Name)											
designated above as:	\triangleright	Campaign T	reasure	r	D &	eputy Tre	asurer.				
1.30	2013)	X		COLL	uce	L-B				
Date)			Sign	nature of	Campaig	n Treasure	er or Depu	ity Treasure	er	

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

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

(PLEASE PRINT OR TYPE)

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MIAMI-DADE ELECTIONS

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) 3. Address (include post office box or street, city, state, zip code) WILLIAM IRA ALTFIELD 1351 NW 12th STREET #505 MIAMI, FLORIDA 33125 4. Telephone 5. E-mail address (305) 548-5280 baltfield@gmail.com 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) MIAMI-DADE, COUNTY COURT JUDGE applicable: **GROUP 13** 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** X 10. Name of Treasurer or Deputy Treasurer MICHAEL NOVAK. MARCUM, LLP 11. Mailing Address 12. Telephone One Southeast 3rd Avenue, 10th Floor (305) 995-9600

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

13. City

Miami

21. City

Miami

27.

19. Name of Bank

Sabadell United Bank

26. Signature of Candidate

16. Zip Code

Primary Depository

1111 Brickell Avenue

Fla.

23. State

33131

20. Address

easurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

15. State

Fla

Novak , do hereby accept the appointment (Please Print or Type Name)

designated above as: $\{ \cdot \}$ Campaign Treasurer

14. County

Miami-Dade

22. County

Miami-Dade

18. I have designated the following bank as my

Deputy Treasurer

Signature of Campaign Treasurer or Deputy Treasurer

17. E-mail address

michael.novak@marcumllp.com

Secondary Depository

24. Zip Code

33131

STATEMENT OF CANDIDATE FOR JUDICIAL OFFICE

(Section 105.031(5), F.S.) (Please Type)

OFFICE USE ONLY VED

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MIAMI-DADE ELECTIONS

I, WILLIAM I. ALTF	WILLIAM I. ALTFIELD			
a judicial candidate, have received, read, and understand the requirements				
of the Florida Code of Judicial Conduct.				
2/Ill	All)			
(Signatu	ure of candidate)			
	7			
2/0	6/2013			
(Date)				

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.

STATEMENT OF CANDIDATE

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

WILLIAM LALTFIELD

OFFICE PRECONLY ED

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MIAMI-DADE ELECTIONS

candidate for the office of COUNTY COURT JUDGE-GROUP 13 ;				
have been provided access to read and understand the requirements of				
Chapter 106, Florida Statutes.				
X JANUARY 30, 2013 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).

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Access to Handbook and the Election Laws of the State of Floriging FEB -8 PM 4: 04

Candidate/Chairperson:		MIAMI-DADE ELECTIONS
WILLIAM	IRA	ALTFIELD
First Name	Middle Name	Last Name
	JUPGE GRO Office Sought / Organization	up 13
· ·	omoc oddgrit i Organizatic	חו
I acknowledge that it is my requirements described in th County Elections Department V	18 tollowina resources	d, understand and follow the available on the Miami-Dad
Florida, County Laws and H	te Laws and Handbooks, ti andbooks. Qualifving Infor	le.gov/elections/candidate.asp) he Election Laws of the State of mation, Electronic Reporting Dates I Recent Legislative Changes.
 Political Committee Handbood Contains information on State Florida, County Laws and Handbood Important Committee Information 	te Laws and Handbooks, tl andbooks, Electronic Repo	he Election Laws of the State of orting Dates and Procedures
Acknowledged by:	Ille Alt	
9 1	Candidate / Chairperson	n Signature
Date: 2/7/13		
Primary Telephone Number:	305 548-5280	
Alternate Telephone Number:	i	i
E-mail address: BALTF	IELD @ GMAIL, COM	

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



MIAMI-DADE ELECTIONS
☑ Candidate (office sought): COUNTY COURT JUDGE GROUP 13
Candidate's Florida Voter Registration Number: 109827049
□ Political Committee:
□ Party Executive Committee:
□ Other:
I, WILLIAM I. ALTEIED (Please print name of Candidate or Chairperson) understand that Campaign Treasurer's Reports must be filed electronically in order to comply with Miami-Dade County requirements.
Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.
Signature of Candidate or Chairperson Date
Day Time Telephone No: 305-548-5280
Email Address: BALTFIELD @ CMAIL.COM

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.