## 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

2013 APR 22 PM 3: 59

MIAMI-DADE ELECTIONS

OFFICE USE ONLY

officer before opening the		3										
1. CHECK APPROPRIATE  Initial Filing of Form		<b>S):</b> -filing to Change:	: 🗆 T	reasu	ırer/D	eputy	Deposito	ory 🔲	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)						3. Address (include post office box or street, city, state, zip						
William Ira Altfield					code) 1351 NW 12th Street Suite 505							
4. Telephone	5. E-mail address				Miami, Florida 33125							
(305 ) 548-5280	williama	williamaltfield@gmail.com										
6. Office sought (include district, circuit, group number) County Court Judge Group 13					7. If a candidate for a <u>nonpartisan</u> office, check if applicable:							
County Count duage Group 10					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 Affi	liation	2					Pa	irty cand	didate.		
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer												
10. Name of Treasurer or Deputy Treasurer William Ira Altfield												
11. Mailing Address						12. Telephone						
1351 NW 12th Street	HENNINGE NA	X20000			( 305 ) 548-5280							
13. City	201 1000	County		15. State		2 2/022		-mail address				
Miami	Miami-Dade Fla				33125 williamaltfield@g				mail.com			
18. I have designated the following bank as my					Primary Depository							
19. Name of Bank				C-020111 A	Addre							
Sabadell United Bank				1111	1 Bri	ckell Aver	nue					
21. City		22. County				23. State			24. Zip C	ode		
Miami		Miami-Dade				Fla.		н	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.										R AND		
25. Date 26. Signature of Qandidate												
April 22, 2013												
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)												
I, WILLIAM ALTEIELD , do hereby accept the appointment (Please Print or Type Name)												
designated above as: Campaign Treasurer Deputy Treasurer.												
4/22/13 X Will thefter												
Date Signature of Campaign Treasurer or Deputy Treasurer												

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MIAMI-DADE ELECTIONS

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1. CHECK APPROPRIATE BOX(ES):									
	Re-filing to Change:	Treas	surer/Deputy	Depository		Office		Party	
2. Name of Candidate (in	this order: First, Middle, La		3. Address (include post office box or street, city, state, zip						
William Ira Altfield	4	code)							
4. Telephone					1351 NW 12th Street Suite 505				
		_	Miami, Florida 33125						
(305 ) 548-5280	williamaltfield@gmail.				- 22	2,000			
6. Office sought (include of		er)	7. If a candidate for a <u>nonpartisan</u> office, check if						
County Court Judge G	roup 13		applicable:  My intent is to run as a Write-In candidate.						
			I wy intent is to full as a write-in candidate.					Jaic.	
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									
Sharon Altfield									
11. Mailing Address C/o William Altfield 12. Tele							phone		
1351 NW 18	2th STREET	Suite &							
13. City	14. County	15. State							
Miami	Miami-Dade	Fla	38125 sydrach123@att.net						
18. I have designated the		Primary Depository Secondary Depository							
19. Name of Bank			). Address						
	ed Bank			Avenue					
21. City	22. County	,	23. State <b>F/a</b> .			24. Zip Co	de		
MIAMI	MIAMI Miami-Dade				č	33131			
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25. Date		26	S. Signature of Can	ididate					
4/22/13		X	X Will theta						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)									
(1)								ŧ	
I,, do hereby accept the appointment (Please Print or Type Name)									
designated above as: Campaign Treasurer Deputy Treasurer.									
4-22-2013 X Sharan Cetheld									
Date	e	Signature of Campaign Treasurer or Deputy Treasurer							