

**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.

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2013 MAR 25 PM 12:43

MIAMI-DADE
ELECTIONS

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)

Lynda G. Bell

3. Address (include post office box or street, city, state, zip code)

343 NW 19th Street
Homestead, FL 33030

4. Telephone

(786) 208-3292

5. E-mail address

Lynda@lyndabell.com

6. Office sought (include district, circuit, group number)

County Commissioner, District 8

7. If a candidate for a nonpartisan office, check if applicable:

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

Adam Cedrati

11. Mailing Address

1001 Brickell Bay Drive, Suite 1400

12. Telephone

(305) 371-6200

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33131

17. E-mail address

acedrati@mallahfurman.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Sabadell United Bank, N.A.

20. Address

1111 Brickell Ave, 29th Floor

21. City

Miami

22. County

Miami-Dade

23. State

Florida

24. Zip Code

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

3/21/2013

26. Signature of Candidate

X Lynda Bell

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

I, Adam Cedrati, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3-21-2013

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

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MIAMI-DADE ELECTIONS

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.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

[X] Initial Filing of Form Re-filing to Change: [] Treasurer/Deputy [] Depository [] Office [] Party

2. Name of Candidate (in this order: First, Middle, Last) Lynda G. Bell

3. Address (include post office box or street, city, state, zip code) 343 NW 19th Street Homestead, FL 33030

4. Telephone (786) 208-3292

5. E-mail address Lynda@lyndabell.com

6. Office sought (include district, circuit, group number) County Commissioner, District 8

7. If a candidate for a nonpartisan office, check if applicable: [] 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 [X] Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer Jose Alcaraz

11. Mailing Address 657 SE 31 Ave

12. Telephone (786) 712-2807

13. City Homestead

14. County Miami-Dade

15. State FL

16. Zip Code 33033

17. E-mail address josealcarazcpa@aol.com

18. I have designated the following bank as my [X] Primary Depository [] Secondary Depository

19. Name of Bank Sabadell United Bank, N.A.

20. Address 1111 Brickell Ave, 29th Floor

21. City Miami

22. County Miami-Dade

23. State Florida

24. Zip Code 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

3/21/2013

26. Signature of Candidate

[X] Lynda Bell

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

I, Jose Alcaraz, do hereby accept the appointment (Please Print or Type Name)

designated above as: [] Campaign Treasurer [X] Deputy Treasurer.

3-21-2013

Date

[X]

Jose Alcaraz

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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MIAMI-DADE
ELECTIONS

I, Lynda G. Bell ,

candidate for the office of County Commissioner, District 8 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

Lynda G. Bell

Signature of Candidate

3/21/13

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

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MIAMI-DADE ELECTIONS

Candidate/Chairperson:

Lynda

G.

Bell

First Name

Middle Name

Last Name

County Commissioner, 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)
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by:

Candidate / Chairperson Signature

Date:

Primary Telephone Number:

(786) 208 3292

Alternate Telephone Number:

E-mail address:

Lynda@Lyndabell.com

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Campaign Treasurer's Report
Electronic Filing Requirements
2013 MAR 25 PM 12:43 for Miami-Dade County



MIAMI-DADE
ELECTIONS

Candidate (office sought): County Commissioner, District 8

Candidate's Florida Voter Registration Number: _____

Political Committee: _____

Party Executive Committee: _____

Other: _____

I, Lynda G. Bell

(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.

Lynda Bell

Signature of Candidate or Chairperson

3/21/2013

Date

Day Time Telephone No: (786) 208-3292

Email Address: Lynda@Lyndabell.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.