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

2014 MAR 31 AM 10: 38

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY

orneer perere eperming an	campaign account.					0	OOL .	OITE
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Depository Party								
2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip								
Albert Armede			code) 4011 W. Flagler St., Suite 206				240	
4. Telephone	5. E-mail address	Tio.	Miami, Florida 33134					
(305) 266-3930	albert@armadaappra	isal.com						
6. Office sought (include of	district, circuit, group numb	oer)	7. If a can	didate for a <u>no</u>	npartis	an office,	checl	k if
	¥ (applica					
Property Appraiser	ž	20 1		My intent is to	run as	a Write-In	candi	date.
8. If a candidate for a par	tisan office, check block	and fill ir	name of party as	applicable:	My inter	nt is to run	as a	
Write-In No	Party Affiliation	4			Part	y candi	date.	
9. I have appointed the fo	llowing person to act as	my [Campaign Trea	surer X	Deputy	Treasurer		
10. Name of Treasurer or D	Deputy Treasurer	184.0						
Albert J. Armada	ž v	1						
11. Mailing Address		999 555		12.	. Teleph	none		
4011 W. Flagler St., Տև	ite 206 Miami, Florida	<u> </u>				266-393	0	
13. City	14. County	15. State		17. E-mail add	dress			
Miami	Miami-Dade	FI	33134	albert@arm	adaap	praisal.c	om	
18. I have designated the	following bank as my		Primary Deposito	ry 🔲 Se	condary	y Deposito	ry	
19. Name of Bank 20. Address						e		
Suntrust Bank	1993 3331 4. 6	<u>. 1</u> 6	6720 SW 88 Str	eet				
21. City	22. County	Lines Lines	23. State		3	24. Zip Co	de	
Miami	Miami-Dade		Florida		3	33196		
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	100	· / 2	6. Signature of Car	ndidate	1/	7	1	
3/29/2014	- 34		X All	14/1/	111		1	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)								
I, Albert J. Armada , do hereby accept the appointment				t				
(Please Print or Type Name)								
designated above as:	Campaign T	reasurer	Deputy Tr	easurer			5	-
3/29/2014 X								
Date		S	ignature of Campai	gn Treasurer or	Deputy	Treasure	r	

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

2014 MAR 31 AM 10: 38

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY

officer before opening the	s campaign accou	uiit.					OFFICE	USL	OIALI
1. CHECK APPROPRIATE Initial Filing of Form	BOX(ES): Re-filing to C	hange: 🔲 .	Treas	surer/Deputy] Depositor	у 🔲	Office		Party
2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip						zip			
Albert Armada				code) 4011 W. Flagler St., Suite 206					
4. Telephone	5. E-mail address	100	Miami, Florida 33134						
(305) 266-3930	albert@armada	aappraisal.c	om						
6. Office sought (include of	listrict, circuit, grou	ıp number)		7. If a cand	didate for a ble:	<u>nonparti</u>	san office	, chec	k if
Property Appraiser		* -			My intent is	to run a	s a Write-I	n cand	idate.
8. If a candidate for a part	<u>isan</u> office, chec	k block and fi	ll in n	name of party as	applicable:	My inte	ent is to rur	n as a	
Write-In No I	Party Affiliation					Pa	rty cand	didate.	
9. I have appointed the fo	llowing person to	act as my	X	Campaign Treas	surer	Deput	y Treasure	r	
10. Name of Treasurer or Deputy Treasurer Jorge L. Armada									
11. Mailing Address		.erseycom				12. Telep	hone		
4011 W. Flagler St., Su	ite 206 Miami,	The state of the s		The state of the s			541-54	12	
13. City	14. County	, 15. S	tate	16. Zip Code	17. E-mail	address			
Miami	Miami-Dade	is, El		33134	garmada(@bellso	uth.net		
18. I have designated the	following bank a	s my	X	Primary Depositor	ту 🔲	Seconda	ry Deposit	ory	
19. Name of Bank		4:30	20.	. Address					
Suntrust Bank			167	720 SW 88 Stre	eet				
21. City	22. Cou	nty 🖑 🕌		23. State			24. Zip C	ode	
Miami	Miami-l	Dade		Florida			33196		
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		as h	26.	. Signature of Can	didate //	///	/	5	
3/29/2014		A CONTRACTOR	X						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)									
l,	Jorge L. A	Armada			, do here	by accep	t the appo	intmen	it
(Please Print or Type Name)									
designated above as: Campaign Treasurer Deputy Treasurer.									
3/29/20)14	X				1/ m	and_		
Date)	17.4	Sig	nature of Campaig	gn Treasure	r or Depu	ity Treasur	er	

STATEMENT OF CANDIDATE

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

 $[1, s] G_{p, k}[y]$

OFFIRE USE ONLY

2014 MAR 31 AM 10: 38

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

ı, Albert Armada					
candidate for the office of Prope	erty Appraiser ;				
have been provided access to read and understand the requirements of					
Chapter 106, Florida Statutes.					
X Signature of Candidate	3/29/2014 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

ar ar ar

line

RECEIVED

2014 MAR 31 AM 10: 39

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

	\$1 G		LLLO HONS DEPAR	I f
Candidate/Chairperson:				
Albert			Armada	
First Name	Mido	lle Name	Last Name	-
Property Appraiser	13/			
	Office Sough	nt / Organizatior	1	
	firm:			
I acknowledge that it is my requirements described in the County Elections Department \	he followin			
	ASL Of			
Contains information on Sta Florida, County Laws and F and Procedures, Important Political Committee Handbo Contains information on Sta	ate Laws and Handbooks, (Candidate Ir ook (<u>http://w</u> hate Laws and Handbooks, E	I Handbooks, the Qualifying Information, and ww.miamidade.st Handbooks, the Electronic Repo	e Election Laws of the State of rting Dates and Procedures,	ıs
			Destalo)	
Acknowledged by:	HHAAA	1////////		
E de la companya del companya de la companya del companya de la co	Candida	te Chairperson	n Signature	
Date: 3/29/2014	6 F			
Primary Telephone Number:	305-26	66-3930		
Alternate Telephone Number	Lat	08-4983		
E-mail address: albert@)armada	aappraisa	l.com	

RECEIVED

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

Candidate (office sought):	Property Appraise	er	
Candidate's Florida Voter F	Registration Number:	108948420	E, 6
□ Political Committee:	* ; # 25		CTION
□ Party Executive Committee	- 28		DADE C
□ Other:	A Company of the Comp		\$00 E
I, Albert Armada	ase print name of Candidate or	Chairnaran	
understand that Campaign T	() (\forall \forall \)	Dec. Print Dec. Dec.	onically via the
Supervisor of Elections websi	te by midnight of the	day designated in	order to comply
with Miami-Dade County requi	rements. I also ackno	owledge that Section	s 12-17 and 12-
21 of the Code of Miami-Da	de County regarding	the filing of the ca	ımpaign finance
reports with the Supervisor of	Elections were rece	ntly amended in tha	t original signed
hardcopies are no longer requi	red.		
I also understand that, in acco	ordance with Section	12-14.1 of the Code	of Miami-Dade
County, Florida, candidates	running for the Offic	ces of Miami-Dade	County Mayor,
Commissioner, Property Appra	aiser, Clerk of the Cir	cuit Courts, and Cor	nmunity Council
must now file the Absentee Ba	ıllot Campaign Repor	t (<u>MD-ED 26</u>) to disc	close the names
of paid campaign workers engage	aged in absentee ball	ot activities.	
		3/29/20)14
Signature of Candid	date or Chairperson		Date
Day Time Telephone Number:	305-266-3930		
Alternate Contact Number: 78	36-208-4983	7 d 10 km 14 t 1	
Email Address: albert@arm	adaappraisal.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.