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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2024 JAN 30 AM 10: 01

NOTE: This form must be on file with the qualifying 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 Eddy L. RoJas

lephone 5. E-mail address 14684 SW 143 RD 2+ Miam: , FL 33186 (305) 354-6411 ecojas 3@ me. com 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: MAyor Mian: Dade county 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 candidate. Party 9. I have appointed the following person to act as my Campaign Treasurer ☐ Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer 12. Telephone 14624 SW 143 Roct (305) 354-64/1 14. County 15. State 16. Zip Code 17. E-mail address 13. City mimi FL 33186 erojas 3@ Me. com Primary Depository ☐ Secondary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address 8699 NW 341454 Truist 21. City 22. County mim: -DAde 23. State

Flori La 24. Zip Code Dowl 33166 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. 26. Signature of Candidate 25. Date 1/30/24 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. (Please Print or Type Name) , do hereby accept the appointment Campaign Treasurer. Deputy Treasurer. designated above as: 1/30/24 X

Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

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

OFFICE USE ONLY

RECEIVED

2024 JAN 30 AM 10: 01

MIAMPDAILE COUNTY ELECTIONS DEPARTMENT

1, <u>Eddy</u> L. Rojes
candidate for the office of Mayor mioni-Dade county;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.
X 1/30/24
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 JAN 30 AM 10: 0 i

			ELECTIONS DEPARTMENT	
Candidate/Chairperson:				
Eddy First Name	۷.		Rojus	
First Name	Middle Na	ime	Last Name	
MAYOr	Mim: Dade Office Sought / O	County		
,	Office Sought / O	rganization		
I acknowledge that it is requirements described County Elections Department Candidate Qualifying I	in the following re ent Website:			
(https://www.miamidae Contains information of Florida, County Laws a	de.gov/global/elections on State Laws and Handand and Handbooks, Qualif	dbooks, the Electric place of the control of the co	fying-handbook.page) ction Laws of the State of , Electronic Reporting Da nt Legislative Changes.	
Florida, County Laws a	e.gov/global/elections/	dbooks, the Elec onic Reporting D	ction Laws of the State of Pates and Procedures,	
Acknowledged by:	Edy L.Roja Candidate/C	<i>\$</i> hairperson Signa	 ature	
Date: 1/30/24				
Primary Telephone Num	(0.0)			
Alternate Telephone Nui	mber:/A			
E-mail address:	0103 @ Me. Com			

Campaign Treasurer's Report Miami-Dade County Electronic Filing Requirement COUNTY



Candidate (office sought): Mayor Mim: - Ocolo County Candidate's Florida Voter Registration Number: 1209396 58
Political Committee:
Party Executive Committee:
Other:
I, Eddy L. Roja-S (Please print name of Candidate or Chairperson)
(Flease print hame of Candidate of Champerson)
understand that Campaign Treasurer's Reports <u>must</u> be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies are no longer required.
I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade County Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, and Community Council must now file the Vote by Mail Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, it applicable.
Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and Candidates running for the Offices of Miami-Dade County Mayor, Commissioner, and Community Council must now file the Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Political Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)4 organizations, if applicable.
- I day las
Signature of Candidate or Chairperson Date
Day Time Telephone Number: (305) 354-6411
Alternate Contact Number:
Email Address: Ather a OMe and

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.