

**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 COUNTY
ELECTIONS DEPARTMENT

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) *Carlos Alberto Martínez Garín* 3. Address (include post office box or street, city, state, zip code) *2521 Segovia Street #3 Coral Gables, FL 33134*

4. Telephone *(786) 704 5626* 5. E-mail address *carlosgarincampaign@gmail.com*

6. Office sought (include district, circuit, group number) *Mayor Miami-Dade County* 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 *Carlos Alberto Martínez Garín*

11. Mailing Address *2521 Segovia Street #3 Coral Gables FL 33134* 12. Telephone *(786) 704 5626*

13. City *Coral Gables* 14. County *Miami-Dade* 15. State *FL* 16. Zip Code *33134* 17. E-mail address *carlosgarincampaign@gmail.com*

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

19. Name of Bank *Truist Bank* 20. Address *8699 NW 36th Street*

21. City *Miami* 22. County *Miami Dade* 23. State *Florida* 24. Zip Code *33164*

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 *01/30/2024*

26. Signature of Candidate *[Signature]*

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

I, *Carlos Alberto Martínez Garín*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

01/30/2024
Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

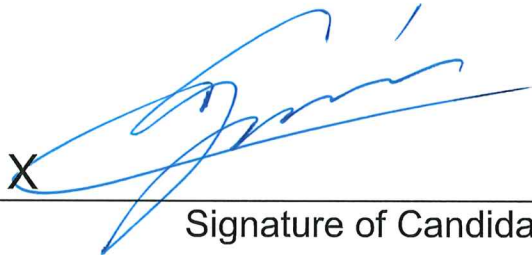
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ELECTIONS DEPARTMENT

I, Carlos Garin Miami Dad Grant
candidate for the office of Mayor ;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X 
Signature of Candidate

01/30/2024
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 COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Carlos

First Name

Alberto

Middle Name

Martinez Garin

Last Name

Mayor Miami Dade County

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

(<https://www.miamidade.gov/global/elections/candidate-qualifying-handbook.page>)

Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.



Political Committee Handbook

(<https://www.miamidade.gov/global/elections/political-committee-resources.page>)

Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by:

Candidate / Chairperson Signature

Date:

01/31/2024

Primary Telephone Number:

786 704 5626

Alternate Telephone Number:

N/A.

E-mail address:

carlos.garin.campaign@gmail.com

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



Candidate (office sought): Mayor Miami Dade County
Candidate's Florida Voter Registration Number: 120910833

Political Committee: _____

Party Executive Committee: _____

Other: _____

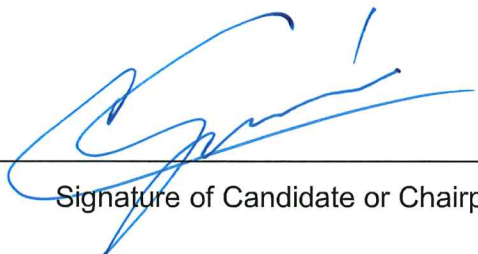
I, Carlos Alberto Martinez Garin
(Please print name of Candidate or Chairperson)

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ELECTIONS DEPARTMENT

understand that Campaign Treasurer's Reports must 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, if 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.



Signature of Candidate or Chairperson

01/30/2024
Date

Day Time Telephone Number: 786 704 5626

Alternate Contact Number: N/A

Email Address: carlos garin campaign@gmail.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.