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

RECEIVED

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ELECTIONS DEPART

officer before opening the campaign account.	OFFICE USE ONLY				
1. CHECK APPROPRIATE BOX(ES):					
	reasurer/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 code)				
ANA MARIA PANDO	1 8360 MEST PLADUEL STUDI				
4. Telephone 5. E-mail address	$\neg \qquad 5UTC \rightarrow \infty$				
(305) 807-3130 PANDO 325 Q AOL. COM	MIAMI FL 33144				
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if				
COUNTY COVET TUDGE	applicable: My intent is to run as a Write-In candidate.				
6ROVP 10					
8. If a candidate for a <u>partisan</u> 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					
11. Mailing Address FLABLER STREET SUITE 200. 12. Telephone (305) 554-7229					
13. City AMI 14. County 15. Stat	te 16. Zip Code 17. E-mail address. 33144 LRIOS Q LRM CPA (UM				
18. I have designated the following bank as my	Primary Depository Secondary Depository				
19. Name of Bank-AC60 20. Address 200 S. BISCAYNE BLVD.					
21. City MIAMI 22. County DADE	23. State 24. Zip Code 3313)				
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 STATES IN IT ARE TRUE.					
SEPTEMBER 6 2011	26. Signatura di Candidate				
	^ _				
	(fill in the blanks and check the appropriate block)				
I, LUIS 2105 (Please Print or Type Name)	, do hereby accept the appointment				
(Please Print or Type Name)					
designated above as: Campaign Treasurer	Deputy Treasurer				
SEPTEMBER 6 2011					
	Signature of Campaign Treasurer or Deputy Treasurer				

STATEMENT OF CANDIDATE FOR JUDICIAL OFFICE

(Section 105.031(5), F.S.) (Please Type) OFFICE USE ONLY

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THAMI-DADE COUNTY
ELECTIONS DEPART

HAM I'IIICII	ANA	MARIA	PANTO
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a judicial candidate, have received, read, and understand the requirements of the Florida Code of Judicial Conduct.

(\$ignature of candidate)

SEPTEMBER 6 2011

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.

(Date)

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

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FLECTIONS DEPARTMENT

I, ANA MARIA MANDO,
candidate for the office of COUNTY COURT TUDGE 6800P 10;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.
X DM Caret SEPT. 6, 2011
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).

JUDICIAL OFFICE CANDIDATE OATH

REGEIVED

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HIAMI-DADE COUNTY OFFICE USE ONLY

OATH OF CANDIDATE (Section 105.031, Florida Statutes) ANA MARIA PANDO (PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING) COUNTY COVET .

MIAMI-DADE CO am a candidate for the judicial office of ; my legal residence is County, Florida; I am a qualified elector of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida. Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida. (305) 807-3130 PANDO 325/W AOL. COM
Telephone Number Email Address Signature of Candidate WEST FLAGLEZ, ST. SUITE 20 MIAMI FL 3314L Address Candidate's Florida Voter Registration Number (located on your voter information card): * Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

ANA MAC-EE-AH

PAN1) - O STATE OF FLORIDA COUNTY OF MIAMI - DADE Sworn to (or affirmed) and subscribed before me this 6 th day of SEPTEMBER, 20_//_. Personally Known: Signature of Notary Public Produced Identification: ____ Print, Type, or Stamp Commissioned Name of Notary Public Type of Identification Produced:

Receipt of Handbook and the Election Laws of the State of Florida COUNTY



Candidate/Chairperson:		i			
ANA	MARIA		PA	Mu	
First Name	Middle Na	Middle Name		Last Name	
COUNTY COURT TUDE	E 68	loup 10			
Office	∋ Sought / Or	ganization		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
This is to acknowledge my receipt of t	he following	ı documents:			
		,/			
Handbooks Available	Edition	Downloaded from Internet	CD-Rom	Other	
The Election Laws of the State of Florida	а	d //	/ 🗆		
Miami-Dade County Qualifying Handboo	ok	₫//			
Committee Handbook					
Electioneering Committee Handbook					
Received by:)			ADE COUNTY	
'	Candidate/Ch	nairperson Sigr	nature		
Date: SEPT. 6 2011					
Phone No.: 305 -807-3130	Fax	No.: 305-	-551-7	1254	
E-mail address: PANTO 375/	a) AOL.	com			

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



Candidate (office sought): COUNTY COURT TUDGE 6	ROVP 10				
□ Political Committee:					
□ Party Executive Committee:					
□ Other:					
ANA MARIA PANDO	ADE COU				
(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 m					
Miami-Dade County Elections Department website and submideadline with original signatures.					
WI HAND	SEPT. 6 2011				
Signature of Candidate or Chairperson	Date				
Day Time Telephone No: 305 - 554 - 7229					
Email Address: LRIOS @ LRM (PA. 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.