

**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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2011 SEP 14 AM 11:54

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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 E. MUNOZ FONTANILLS

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

100 LINCOLN RD (APT # 323)
MIAMI BEACH, FL. 33139-2013

4. Telephone

(786) 541-3938

5. E-mail address

GG BEACH 1 @ YAHOO.COM

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

COUNTY COMMISSIONER DISTRICT 5

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 E. MUNOZ FONTANILLS

11. Mailing Address

100 LINCOLN RD (APT # 323)

12. Telephone

786 541-3938

13. City

MIAMI BEACH

14. County

MIAMI DADE

15. State

FL

16. Zip Code

33139-2013

17. E-mail address

GG BEACH 1 @ YAHOO.COM

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

19. Name of Bank

BANK of AMERICA FL

20. Address

401 LINCOLN ROAD

21. City

MIAMI BEACH

22. County

MIAMI DADE

23. State

FL

24. Zip Code

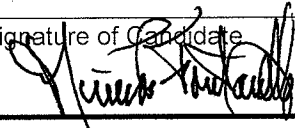
33139

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

09-14-2011

26. Signature of Candidate

X 

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

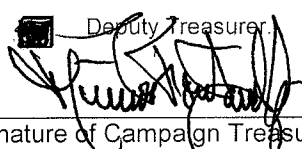
I, CARLOS E. MUNOZ FONTANILLS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

09-14-2011

Date

X


Signature of Campaign Treasurer or Deputy Treasurer

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

100 LINCOLN RD (APT # 323)
MIAMI BEACH, FL.
33139-2013

4. Telephone

(786) 541-3938

5. E-mail address

GBBEACH1@YAHOO.COM

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

COUNTY
COMMISSIONER DISTRICT 5

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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

JORGE GARCIA

11. Mailing Address

1040 COLLINS AVE APT # 807

12. Telephone

()

13. City

MIAMI BEACH

14. County

MIAMI DADE

15. State

FL

16. Zip Code

33139

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25. Date

09-14-2011

26. Signature of Candidate

X

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

I, JORGE GARCIA, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

09-14-2011

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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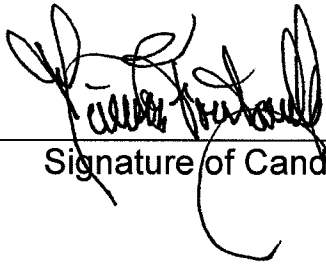
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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

I, CARLOS E. MUNOZ FONTANILLS,
candidate for the office of COUNTY COMMISSIONER DISTRICT 5;

have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X



Signature of Candidate

09-14-2011

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).

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



Candidate (office sought): COUNTY COMMISSIONER DISTRICT 5

Political Committee: _____

Party Executive Committee: _____

Other: _____

1. CARLOS E. MUNOZ FONTANILLS
(Please print name of Candidate or Chairperson)

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ELECTIONS DEPARTMENT

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with the 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.

09-14-2011

Signature of Candidate or Chairperson

Date

Day Time Telephone No: 786-541-3938

Email Address: GG BEACH1@YAHOO.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.

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



Candidate/Chairperson:

CARLOS E. MONOZ FONTANILLS

First Name

Middle Name

Last Name

COUNTY
COMMISSIONER DISTRICT 5

Office Sought / Organization

This is to acknowledge my receipt of the following documents:

Handbooks Available	Edition	Downloaded from Internet	CD-Rom	Other
The Election Laws of the State of Florida	Oct-2010	<input type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	

Received by: _____

Candidate/Chairperson Signature

Date: _____

09-14-2011

Phone No.: _____

786-541-3938

Fax No.: _____

E-mail address: _____

GG BEACH 1@YAHOO.COM

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