

**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  
11 NOV 17 AM 7:22  
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)**

Lourdes Simon

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

6468 Manor Lane  
South Miami, Florida 33143

**4. Telephone**

(305 ) 608-3737

**5. E-mail address**

judgelourdessimon@gmail.cc

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

County Court Judge, Group 38  
11th Judicial Circuit

**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**

Tomas Gamba

**11. Mailing Address**

2701 Ponce De Leon Blvd. Mezzanine

**12. Telephone**

( 305 ) 448-4010

**13. City**

Coral Gables,

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33134

**17. E-mail address**

tfg@gambalombana.com

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

**19. Name of Bank**

Sabadell United Bank

**20. Address**

9100 Dadeland Blvd. #107

**21. City**

Miami

**22. County**

Miami-Dade

**23. State**

FL

**24. Zip Code**

33156

**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**

11-2-11

**26. Signature of Candidate**



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

I, Tomas Gamba, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

Campaign Treasurer     Deputy Treasurer.

11-2-11

Date

  
Signature of Campaign Treasurer or Deputy Treasurer

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Lourdes Simon

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

6468 Manor Lane  
South Miami, FL 33143

**4. Telephone**

(305 ) 608-3737

**5. E-mail address**

judgelourdessimon@gmail.com

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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**

Karen T. Jones

**11. Mailing Address**

6468 Manor Lane

**12. Telephone**

( 305 ) 608-3737

**13. City**

South Miami

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33143

**17. E-mail address**

karenjonesmiami@gmail.com

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

**19. Name of Bank**

Sabadell United Bank

**20. Address**

9100 Dadeland Blvd. #107

**21. City**

Miami

**22. County**

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**25. Date**

10-18-11

**26. Signature of Candidate**



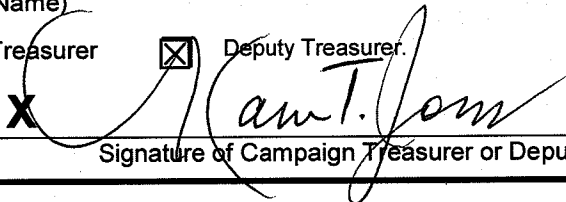
**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Karen T. Jones, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

10/24/11

Date



Signature of Campaign Treasurer or Deputy Treasurer