

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.

OFFICE USE ONLY

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MIAMI-DADE
ELECTIONS

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)

JUAN E. FIOL

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

13717 SW 13 STREET
MIAMI FL 33184

4. Telephone

(305) 593-5291

5. E-mail address

VISIONREALTYMIAMI@YATCO.COM

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

Commissioner District 11

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

JUAN E. FIOL

11. Mailing Address

13717 SW 13 STREET MIAMI FL 33184

12. Telephone

(305) 593-5291

13. City

MIAMI

14. County

DADE

15. State

FL

16. Zip Code

33184

17. E-mail address

VISIONREALTYMIAMI@YATCO.COM

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

19. Name of Bank

CAPITAL BANK NA

20. Address

1390 S Dixie Highway

21. City

CORAL GABLES

22. County

MIAMI-DADE

23. State

FL

24. Zip Code

33146

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

2/7/2012

26. Signature of Candidate

X [Signature]

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

I, JUAN E. FIOL, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

2/7/12
Date

X [Signature]
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

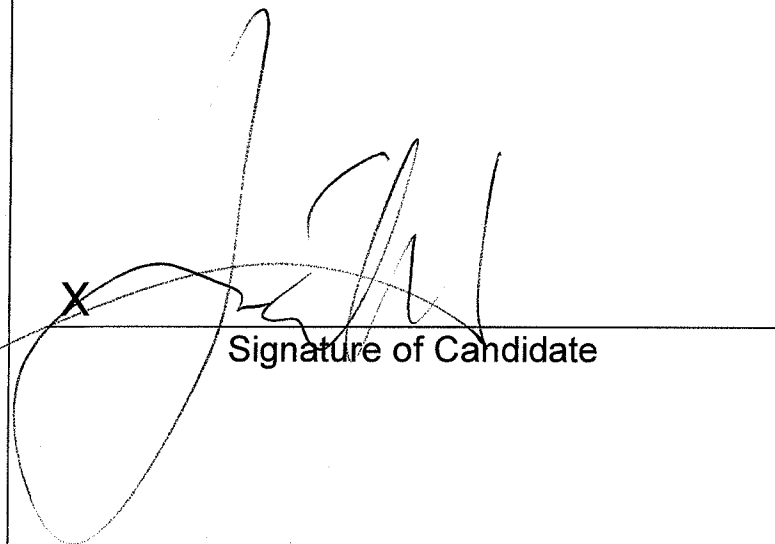
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ELECTIONS

I, JUAN E FOL,
candidate for the office of COMMISSIONER DISTRICT 11;

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

X 
Signature of Candidate

2/7/12
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).

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



Candidate/Chairperson:

JUAN E FIOLE
First Name Middle Name Last Name

COMMISSIONER DISTRICT 11
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		<input checked="" type="checkbox"/>	<input type="checkbox"/>	2012 FEB - 7 PM 3:53 RECEIVED
Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	

MIAMI-DADE ELECTIONS

Received by:

[Signature]
Signature of Candidate or Chairperson

2/7/12
Date

Day Time Telephone Number: (305) 593-5291

Alternate Contact Number: _____

Email Address: VISIOWREACTYMiami@yahoo.com

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



Candidate (office sought): Commissioner District 11

Political Committee: _____

Party Executive Committee: _____

Other: _____

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MIAMI-DADE
ELECTIONS

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I, JUAN E. Fiol
(Please print name of Candidate or Chairperson)

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.

[Signature] _____ 2/7/12 _____
Signature of Candidate or Chairperson Date

Day Time Telephone Number: 305-593-5291

Alternate Contact Number: (305) 593-5291

Email Address: VISIONREADYMIAMI @ YA HOO.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.