

**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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MIAMI-DADE
ELECTIONS

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)

Daniel A. Espino

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

*289 Laurel Way
Miami Springs, FL 33166*

4. Telephone

(305) 773-3980

5. E-mail address

Dan@DanEspino.com

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

Miami-Dade County School Board, 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

Alissa Garcia

11. Mailing Address

799 Brickell Plaza, Suite 804

12. Telephone

()

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33131

17. E-mail address

alissa@nationalhealthtransport.com

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

19. Name of Bank

Bank of America

20. Address

175 East Hiabek Drive

21. City

Hiabek

22. County

Miami-Dade

23. State

FL

24. Zip Code

33010

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

2/9/12

26. Signature of Candidate

X [Signature]

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

I, *Alissa D. Garcia*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2/9/12
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, Daniel A. Espino,

candidate for the office of Miami-Dade County School Board, Dist. S;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

Daniel A. Espino
Signature of Candidate

2/9/12
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).

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

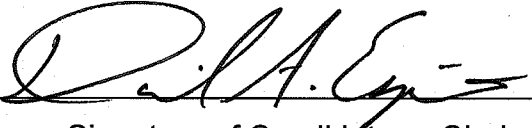


- Candidate (office sought): Miami Dade County School Board, Dist. 5
- Political Committee: _____
- Party Executive Committee: _____
- Other: _____

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I, Daniel A. Espino
(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.

 2/9/12
Signature of Candidate or Chairperson Date

Day Time Telephone Number: (305) 558-5300

Alternate Contact Number: (305) 773-3980

Email Address: Dan @ Dan Espino. 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:

Daniel A. Espino
 First Name Middle Name Last Name

Miami - Dade County School Board, 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		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Committee Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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Received by:

D. A. Espino 2/9/12
 Signature of Candidate or Chairperson Date

Day Time Telephone Number: (305) 558-5300

Alternate Contact Number: (305) 773-3980

Email Address: Dan @ Dan Espino . com