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MIAMI-DADE ELECTIONS

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

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)

Luis Garcia

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

PO Box 402684 MIAMI BEACH, FL 33140

4. Telephone

(305) 962-1641

5. E-mail address

LUIS@LUISGARCIA2012.COM

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

Miami Dade County Commission Dist. 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

Lawrence A. Herrup

11. Mailing Address

326 71 St.

12. Telephone

(305) 866-6611

13. City

Miami Beach

14. County

Miami Dade

15. State

FL

16. Zip Code

33141

17. E-mail address

lherrup@lherrupcpa.com

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

19. Name of Bank

City National Bank

20. Address

326 71 St.

21. City

Miami Beach

22. County

Miami Dade

23. State

FL

24. Zip Code

33141

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

4-4-12

26. Signature of Candidate

X [Signature]

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

I, Lawrence A. Herrup, do hereby accept the appointment (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/4/12

Date

X [Signature of Campaign Treasurer or Deputy Treasurer]

Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**  
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

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ELECTIONS

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

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)  
*LUIS GARCIA*

3. Address (include post office box or street, city, state, zip code)  
*P.O. Box 402684  
MIAMI BEACH, FL  
33140*

4. Telephone  
*(305) 962-1641*

5. E-mail address  
*LUIS @ LUIS GARCIA 2012 .COM*

6. Office sought (include district, circuit, group number)  
*MIAMI DADE COUNTY COMMISSIONER Dist 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  
*LUIS GARCIA*

11. Mailing Address  
*P.O. 402684*

12. Telephone  
*(305) 962-1641*

13. City  
*MIAMI BEACH*

14. County  
*MIAMI DADE*

15. State  
*FL*

16. Zip Code  
*33140*

17. E-mail address  
*LUIS @ LUIS GARCIA 2012 .COM*

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

19. Name of Bank  
*CITY NATIONAL BANK*

20. Address  
*300 71 ST.*

21. City  
*MIAMI BEACH*

22. County  
*MIAMI DADE*

23. State  
*FL.*

24. Zip Code  
*33140*

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  
*4-4-12*

26. Signature of Candidate  
*X Garcia L.*

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  
I, *LUIS GARCIA*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.  
*4-4-12*    *X Garcia L.*  
Date    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, Luis R. Garcia Jr,

candidate for the office of COUNTY COMMISSIONER Dist #5;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

Garcia Jr.  
Signature of Candidate

4-4-12

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 Commission
- Political Committee: \_\_\_\_\_
- Party Executive Committee: \_\_\_\_\_
- Other: \_\_\_\_\_

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I, LUIS Garcia  
(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.

 4-4-12  
Signature of Candidate or Chairperson Date

Day Time Telephone Number: \_\_\_\_\_

Alternate Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

*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:**

LUIS                                      RENE                                      GARCIA JR.  
 First Name                                      Middle Name                                      Last Name

MIAMI-DADE COUNTY COMMISSIONER                                      DIST #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 type="checkbox"/>	<input type="checkbox"/>	

**Received by:**

*Garcia Jr.*  
 Signature of Candidate or Chairperson

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 ELECTIONS  
 4-4-12  
 Date

Day Time Telephone Number: 305-962-1641

Alternate Contact Number: 305-962-0297

Email Address: LUISGCMB@AOL.COM