| STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE | | 2012 AUG 30 PM 12: 25 | | | |
|---|---|-------------------------|-------------------------------|--|--|
| (PLE | ASE TYPE) | MIAMI-DADE ELECTIONS | | | |
| 1. Full Name of Committee | | | Telephone | | |
| Accuracy in Voting | | | 305-491-5182 | | |
| Mailing Address (include city | v, state and zip code) | 4) | | | |
| 8420 SW 47 Street, Miami, FL 33155 | | | | | |
| Street Address (include city, state and zip code) Same | | | | | |
| 2. Affiliated or Connected Or committees) | ganizations (includes other committe | es of contin | nuous existence and political | | |
| Name of Affiliated or Connected Organization | Mailing Address | | Relationship | | |
| None | | | | | |
| | 3. Area, Scope and Jurisdiction of the Committee Advocate for fair and accurate elections, including election contests | | | | |
| 4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.) legal | | | | | |
| 5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name) | | | | | |
| Full Name | Mailing Address | | Committee Title or Position | | |
| Pedro J. Garcia | 8420 SW 47 Street, Miami, FL 3 | 3155 C | Chairman | | |

| List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name) | | | | | |
|---|---|--|-----------------------------|--|--|
| Full Name | Mailing Add | ress Co | Committee Title or Position | | |
| None | | -20 | | | |
| | 7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate) | | | | |
| Full Name | Mailing Address | Office Sought | Party m | | |
| Not Applicable | | | CEIVE | | |
| 8. List Any Issues this Co | mmittee is Supporting: Election | on contest in 2012 Prope | | | |
| List Any Issues this Co | | | | | |
| 9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party Not Applicable | | | | | |
| 10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Donation to a 501(c)(3) organization | | | | | |
| 11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds | | | | | |
| Name of Bank or Dep | Name of Bank or Depository & Account Number Mailing Address | | | | |
| Intercontinental Bank | | 5722 SW 8th Street West Miami, FL 33144 | | | |
| 12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any | | | | | |
| Report Title | Dates Required to be Filed | Name & Position of Official | Mailing Address | | |
| None | | | | | |
| STATE OF Florida | <u>+</u> | Miami-Dade | COUNTY | | |
| I, Pedro J. Garcia , certify that the information in this Statement of | | | | | |
| Organization is complete, tr | rue and correct. | _ / | | | |
| X 1 | | 8/2 | 30/12 | | |
| Signature of (| Chairman of Political Committee | | Date | | |

| APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR POLITICAL COMMITTEES (Sections 106.011(1) and 106.021(1), F.S.) | 2012 AUG | EIVED 30 PM12:25 MI-DADE ECTIONS | 5 |
|--|---|---|-----------------------|
| CHECK APPROPRIATE BOX: | | | OFFICE USE ONLY |
| Original Appointment of Treasurer | tment of Treasurer | | Deputy Treasurer |
| 1. Committee or Organization | | 2. Telephone | |
| Accuracy in Voting | | (305)491- | 5182 |
| 3. Name of Treasurer or Deputy Treasurer 4. Email (optional |) | 5. Telephone (optional) | |
| Pedro J. Garcia pgarciamdpa@g | jmail.com | (305) 491- | 5182 |
| 6. Mailing Address 8420 SW 47 Street, Miami, FL 33155 7. Street Address Spime | | | |
| 8. The following bank has been designated as the X Primary Depository Secondary Depository | | | |
| 9. Name of Bank | 10. Street Address | | |
| Intercontinenal Bank | 5722 SV | V 8th Str | reet |
| 11. City Miami | 12. State | | 13. Zip Code 33155 |
| 14. Signature of Chairman | 15. Name of Chairman (Print or Type) Pedro J. Garcia | | |
| Campaign Treasurer's Acceptance of Appointment , do hereby accept the appointment as | | | |
| (Please Print or Type) treasurer or deputy treasurer for Accuracy in Voting (Committee or Organization) | | | |
| UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE. | | | |
| 8/30/12 X | 1-1- | | |
| Date DS-DE 6 (Rev. 7/10) | Signature of Camp | aign Treasurer or | Deputy Treasurer |

| REGISTERED AGENT STATEMENT OF APPOINTMENT (Section 106.022, F.S.) | | OFFICE USE DIONEIVED | |
|--|---------------------------------------|------------------------------|--|
| | | 2012 AUG 30 PM 12: 25 | |
| | | MIAMI-DADE ELECTIONS | |
| ✓ Original Appointment □ Change of Appoint | | ELECTIONS | |
| Change of Mailing Address Change of Physic | | Office Information | |
| Name | ent and C | Office Information Telephone | |
| Pedro J. Garcia | | 305-491-5182 | |
| Street Address 8420 SW 47 Street | | | |
| City Miami | State FL | Zip Code 33155 | |
| Mailing Address Same | 12 | | |
| City | State | Zip Code | |
| I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer. Signature of Registered Agent Date | | | |
| Former Registered Agent and Office Information (for changes only) | | | |
| Name | | Telephone | |
| Street Address | | 1 | |
| City | State | Zip Code | |
| Committee or | Committee or Organization Information | | |
| Name of Committee or Organization Accuracy in Voting | | | |
| Street Address 8420 SW 47 Street | | Telephone 305-491-5182 | |
| City Miami | State FL | Zip Code 33155 | |
| Signature of Chairperson | | | |
| | | | |
| Pedro J. Garcia | | <u> </u> | |
| Printed Name of Chairperson | | Date | |

Form DS-DE 41 (revised 6/11)

RECEIVED



Access to Handbook and the Election Laws of the State of Florida PM 12: 49

MIAMI-DADE

ELECTIONS

Candidate/Chairperson:

| Pedro | J. | Garcia |
|------------|-----------|--------------|
| First Name | Middle Na | me Last Name |

Accuracy in Voting

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

- □ Candidate Qualifying Handbook (<u>http://www.miamidade.gov/elections/candidate.asp</u>) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.
- Political Committee Handbook (<u>http://www.miamidade.gov/elections/pacs.asp</u>) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

| Acknowledged by:Candidate / Chairperson Signature |
|---|
| Date: 8/30/12 |
| Primary Telephone Number: 305-491-5182 |
| Alternate Telephone Number: |
| E-mail address: |

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



| Candidate (office sought): | |
|--|-----------------------|
| Candidate's Florida Voter Registration Number: | |
| Political Committee: Accuracy in Voting | N9 |
| □ Party Executive Committee: | MANG 3 |
| □ Other: | |
| Pedro J. Garcia | VED MI2: 49 NIS |
| (Please print name of Candidate or Chairpe | rson) |

understand that Campaign Treasurer's Reports <u>must</u> be filed electronically in order to comply with 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.

Signature of Candidate or Chairperson

Date

Day Time Telephone No:

305-491-5182

Email Address: pgarciamdpa@gmail.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.