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STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

2014 OFFICE USE ONLY
MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

1. Full Name of Committee

A Better Dade

Telephone

786-473-4573

Mailing Address (include city, state and zip code)

5245 NW 36th St Miami Springs, FL 33166 Ste 200

Street Address (include city, state and zip code)

5245 NW 36th St Miami Springs, FL 33166 Ste 200

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or Connected Organization

Mailing Address

Relationship

n/a

3. Area, Scope and Jurisdiction of the Committee

Recall of Mayor Gimenés (Miami - Dade)

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

Recall of Mayor Gimenés

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

Jack Garcia

5245 NW 36th St
Miami Springs, FL 33166
Ste 200

Chairman and
Treasurer

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2014 AUG -5 PM 2:44

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR POLITICAL COMMITTEES
(Sections 106.011(1) and 106.021(1), F.S.)

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization <i>A Better Dade</i>		2. Telephone <i>(786) 473-4573</i>	
3. Name of Treasurer or Deputy Treasurer <i>Jack Garcia</i>		4. Email (optional) <i>Recall.Gimenez@outlook.com</i>	
5. Telephone (optional) <i>(786) 473-4573</i>			
6. Mailing Address <i>5245 NW 36th St Miami Springs, FL 33166 Ste 200</i>			
7. Street Address <i>5245 NW 36th St Miami Springs, FL 33166 Ste 200</i>			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank <i>Bank United</i>		10. Street Address <i>7970 NW 36th St</i>	
11. City <i>Miami</i>		12. State <i>FL</i>	13. Zip Code <i>33166</i>
14. Signature of Chairman <i>[Signature]</i>		15. Name of Chairman (Print or Type) <i>Jack Garcia</i>	

Campaign Treasurer's Acceptance of Appointment

I, *Jack Garcia*, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for *A Better Dade*
(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.

8/5/14
Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer

6. 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 Address	Committee Title or Position
Antonio Javier Diaz	5245 NW 36th St Miami Springs, FL 33166 Ste 200	Deputy Treasurer / Vice Chair

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

8. List Any Issues this Committee is Supporting: Recalling Mayor Gimenez
 List Any Issues this Committee is Opposing: Mayor Gimenez

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?

Charitable Contributions to a 501(c)(3)

11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds

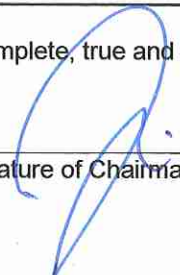
Name of Bank or Depository & Account Number	Mailing Address
Bank United	7970 NW 36th St Miami Springs, FL 33166 Ste 200

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
n/a			

STATE OF Florida COUNTY Miami - Dade

I, Jack Garcia, certify that the information in this Statement of Organization is complete, true and correct.

X 
 Signature of Chairman of Political Committee

8/5/14
 Date

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 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

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

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2014 AUG -5 PM 2:45
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: A Better Dade

Party Executive Committee: _____

Other: _____

I, Jack 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.

I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade County, Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Absentee Ballot Campaign Report ([MD-ED 26](#)) to disclose the names of paid campaign workers engaged in absentee ballot activities.

[Signature] _____ 8/5/14 _____
Signature of Candidate or Chairperson Date

Day Time Telephone Number: 786-473-4573

Alternate Contact Number: 305-219-3460

Email Address: Becall.Grimenez@outlook.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.



Access to Handbook and the Election Laws of the State of Florida

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Jack

First Name

Middle Name

Garcia

Last Name

A Better Dade

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 (<http://www.miamidade.gov/elections/candidate.asp>)
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 (<http://www.miamidade.gov/elections/pacs.asp>)
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: _____

8/5/14

Primary Telephone Number: _____

786-473-4573

Alternate Telephone Number: _____

305-219-3460

E-mail address: _____

Recall Gimenez@outlook.com

RECEIVED

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

2014 OFFICE RESPONSE 45
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

- Original Appointment
- Change of Appointment
- Change of Mailing Address
- Change of Physical Address

Registered Agent and Office Information

Name Antonio J Diaz Telephone 786-473-4573

Street Address 5245 NW 36th St Ste 200

City Miami Springs State FL Zip Code 33166

Mailing Address 5245 NW 36th St Ste 200

City Miami Springs State FL Zip Code 33166

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] Date 08/05/14
Signature of Registered Agent Date

Former Registered Agent and Office Information (for changes only)

Name Telephone

Street Address

City State Zip Code

Committee or Organization Information

Name of Committee or Organization A Better Dade

Street Address 5245 NW 36th St Ste 200 Telephone 786-473-4573

City Miami Springs State FL Zip Code 33166

[Signature]
Signature of Chairperson

Jack Garcia Date 8/5/14
Printed Name of Chairperson Date