

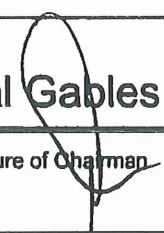
**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(1) and 106.021(1), F.S.)

RECEIVED
2014 OCT 15 AM 9:18
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization Alliance For A Better Community PC		2. Telephone (305) 442-2200	
3. Name of Treasurer or Deputy Treasurer Joaquin Urquiola		4. Email (optional) joaquin.urquiola@gskcpas.com	
		5. Telephone (optional) (305) 442-2200	
6. Mailing Address 2121 Ponce de Leon Blvd., Suite 1100, Coral Gables, FL 33134			
7. Street Address 2121 Ponce de Leon Blvd., Suite 1100, Coral Gables, FL 33134			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank BB&T		10. Street Address 2000 Ponce de Leon Blvd, Suite 101	
11. City Coral Gables		12. State FL	13. Zip Code 33134
14. Signature of Chairman X 		15. Name of Chairman (Print or Type) Jean-Patrick Maignan	

Campaign Treasurer's Acceptance of Appointment

I, **Joaquin Urquiola**, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for **Alliance For A Better Community PC**
(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.**

10/7/14 **X** 
Date Signature of Campaign Treasurer or Deputy Treasurer



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

RECEIVED

2014 OCT 15 AM 9:18

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Jean-Patrick

Maignan

First Name

Middle Name

Last Name

Alliance For A Better Community PC

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)
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by: Candidate / Chairperson Signature

Date: 9/29/14

Primary Telephone Number: 786 486 6924

Alternate Telephone Number: 305 945 7446

E-mail address: caryolofstic@aol.com

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

RECEIVED

2014 OCT 15 AM 9:18

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

- Candidate (office sought): _____
Candidate's Florida Voter Registration Number: _____
- Political Committee: Alliance For A Better Community PC
- Party Executive Committee: _____
- Other: _____

I, Jean-Patrick Maignan
(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 of Candidate or Chairperson

Date

Day Time Telephone Number: 786 486 6924

Alternate Contact Number: 305 949 7446

Email Address: corp@optima2.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.