

**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)

Bruno A. Barreiro

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

2101 SW 4 Ave

Miami, FL 33129

4. Telephone

(305) 642-2228

5. E-mail address

info@voteforbruno.com

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

County Commission - 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 -

Bruno A. Barreiro

11. Mailing Address

P.O. Box 015644

12. Telephone

(305) 642-2228

13. City

Miami

14. County

Miami Dade

15. State

FL

16. Zip Code

33101

17. E-mail address

info@voteforbruno.com

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

19. Name of Bank

Ocean Bank

20. Address

780 NW 42 Avenue

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33126

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

9-17-15

26. Signature of Candidate

X

Bruno Barreiro

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

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

designated above as: Campaign Treasurer Deputy Treasurer.

9-17-15

X

Bruno Barreiro

Date

Signature of Campaign Treasurer or Deputy Treasurer

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Bruno A. Barreiro

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

P.O. Box 015644
Miami, FL 33101

4. Telephone

(305) 642-2228

5. E-mail address

info@voteforbruno.com

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

County Commission, District 5

7. If a candidate for a nonpartisan office, check if applicable:

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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

Zoraida A. Barreiro

11. Mailing Address

P.O. Box 015644

12. Telephone

(305) 642-2228

13. City

Miami

14. County

Miami Dade

15. State

FL

16. Zip Code

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25. Date

9-17-15

26. Signature of Candidate

X

Bruno Barreiro

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

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

designated above as: Campaign Treasurer Deputy Treasurer.

9-17-15

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer

Date

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DEPOSITORY FOR CANDIDATES**

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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)

Bruno A. Barreiro

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

P.O. Box 015644
Miami, FL 33101

4. Telephone

(305) 642-2228

5. E-mail address

info@voteforbruno.com

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

County Commission - District 5

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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

Loreta M. Sanchez

11. Mailing Address

P.O. Box 015644

12. Telephone

(305) 642-2228

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

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25. Date

9-17-15

26. Signature of Candidate

X



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

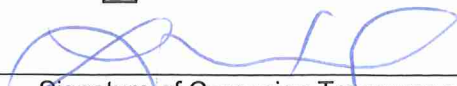
I, Loreta M. Sanchez, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

9-17-15

Date

X


Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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MIAMI-DADE
ELECTIONS

I, Bruno A. Barreiro,
candidate for the office of County Commission - District 5 ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X

Bruno Barreiro
Signature of Candidate

9-17-15
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
Miami-Dade County Electronic Filing Requirements



Candidate (office sought): County Commission - District 5

Candidate's Florida Voter Registration Number: 109217527

Political Committee: _____

Party Executive Committee: _____

Other: _____

I, Bruno A. Barreiro
(Please print name of Candidate or Chairperson)

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ELECTIONS

I 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.

Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that candidates for Property Appraiser also fill out the Miami-Dade county Contributing Entity (MD-ED 19) form for every reporting period if contributions are received from a corporation incorporated under the laws of the State of Florida or any other state or any foreign country of any partnership or any other legal entity other than a natural person.

Bruno Barreiro 9-17-15
Signature of Candidate or Chairperson Date

Day Time Telephone Number: 305-642-2228

Alternate Contact Number: 305-856-7835

Email Address: info@voteforbruno.com



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

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Candidate/Chairperson:

MIAMI-DADE ELECTIONS

Beuno

A.

Barreiro

First Name

Middle Name

Last Name

County Commission - District 5

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:

Beuno Barreiro

Candidate / Chairperson Signature

Date:

9-17-15

Primary Telephone Number:

305-642-2228

Alternate Telephone Number:

305-856-7835

E-mail address:

info@voteforbeuno.com