

**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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2015 OCT -1 AM 9:09
MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

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)

Carlos A. Gimenez

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

1001 Brickell Bay Drive, Suite 1400
Miami, FL 33131

4. Telephone

(305) 928-2020

5. E-mail address

info@gimenezformayor.com

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

Mayor - Miami-Dade County

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

Tom McDonald

11. Mailing Address

1001 Brickell Bay Drive, Suite 1400

12. Telephone

(305) 371-6200

13. City

Miami

14. County

Miami-Dade

15. State

Florida

16. Zip Code

33131

17. E-mail address

tmcdonald@mallahfurman.com

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

19. Name of Bank

Sabadell United Bank, N.A.

20. Address

1111 Brickell Avenue, 29th Floor

21. City

Miami

22. County

Miami-Dade

23. State

Florida

24. Zip Code

33131

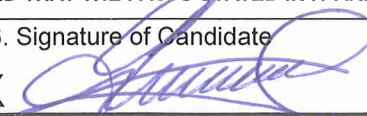
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

9/28/15

26. Signature of Candidate

X



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

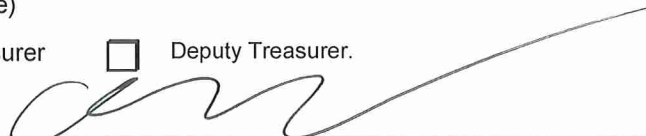
I, Tom McDonald, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

9-28-15

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

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Carlos A. Gimenez

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Miami, FL 33131

4. Telephone

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info@gimenezformayor.com

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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

Barry S. Gould

11. Mailing Address

1001 Brickell Bay Drive, Suite 1400

12. Telephone

(305) 371-6200

13. City

Miami

14. County

Miami-Dade

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Florida

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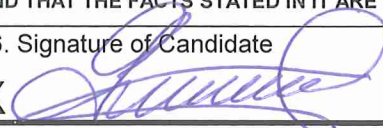
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25. Date

9/28/15

26. Signature of Candidate



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

I, Barry S. Gould, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

9-25-15



Date

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 COUNTY
ELECTIONS DEPARTMENT

I, Carlos A. Gimenez,

candidate for the office of Mayor - Miami-Dade County;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



Signature of Candidate

9/28/15

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).



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

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Carlos

A.

Gimenez

First Name

Middle Name

Last Name

Mayor - Miami-Dade County

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: [Signature] Candidate / Chairperson Signature

Date: 9/28/15

Primary Telephone Number: (305) 928-2020

Alternate Telephone Number:

E-mail address: info@gimenezformayor.com

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



Candidate (office sought): Mayor - Miami-Dade County

Candidate's Florida Voter Registration Number: 109141355

Political Committee: _____

Party Executive Committee: _____

Other: _____

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ELECTIONS DEPARTMENT

Carlos A. Gimenez

I, _____
(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.

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.

Signature of Candidate or Chairperson

Date

Day Time Telephone Number: (305) 928-2020

Alternate Contact Number: _____

Email Address: info@gimenezformayor.com

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