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.

RECEIVED

2016 JUN 24 AM 10: 24

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY

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1. CHECK APPROPRIATE BOX(ES): ✓ Initial Filing of Form Re-filing to Change: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party									Party	
2. Name of Candidate (in the	nis orde	r: First, Middle, L:	ast)	3	3. Address (inclu	de post o	ffice box or s	street, city, s	state, z	
Nelson Diaz		3. Address (include post office box or street, city, state, zip code)								
					10945 SW 82 Avenue					
4. Telephone 5. E-mail address					Miami, FL. 33156					
(305) 591-3840 MiamiDadeRECChairman@c										
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if								k if		
MDC Rep Exec Commit		applicable:								
My intent is to run as a W							s a Write-In	candi	date.	
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 ☐ Republican Party candidate.										
9. I have appointed the following person to act as my										
10. Name of Treasurer or De	eputy Tr	reasurer								
Jose A. Riesco, CPA										
11. Mailing Address 12. Telephone										
2600 South Douglas Road, Suite 900 (305) 445-0777										
13. City	13. City 14. County 15. State					te 16. Zip Code 17. E-mail address				
Coral Gables	Mian	ni-Dade	FL		33134 Jose@riescoandcompany.com					
18. I have designated the following bank as my Primary Depository Secondary Depository										
19. Name of Bank					20. Address					
SunTrust Bank				200	200 Alhambra					
21. City		22. County			23. State	24. Zip Code				
Coral Gables		Miami-Dade			FL 33134					
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.									R AND	
25. Date 26. Signature of Candidate										
6-24-16					X Andrews					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
L		do h	erehv accer	ot the annoir	otmont					
(Please Print or Type Name), do hereby accept the appointment										
designated above as: Campaign Treasurer Deputy Treasurer.										
6/24/2016 X										
Date				Sign	nature of Campai	gn Treas	urer or Depu	ity Treasure	r	

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



Candidate (office sought):						
Candidate's Florida Voter Registration Numb	ner: 105214292					
Political Committee:						
Party Executive Committee: MDC Rep E	xec Committeeman, District #29					
Other:	n e					
I, Nelson I	0- 2					
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 Sect County, Florida, candidates running for the Commissioner, Property Appraiser, Clerk of the must now file the Absentee Ballot Campaign Re of paid campaign workers engaged in absentee	Offices of Miami-Dade County Mayor, Circuit Courts, and Community Council port (MD-ED 26) to disclose the names					
Lastly, I understand that Section 2.69(e) of the that candidates for Property Appraiser also fill of Entity (MD-ED 19) form for every reporting per corporation incorporated under the laws of the Storeign country of any partnership or any other leads to the storeign country of any partnership or any other lead	out the Miami-Dade county Contributing riod if contributions are received from a State of Florida or any other state or any					
Signature of Candidate or Chairperso						
Day Time Telephone Number: 305-591-3840						
Alternate Contact Number:						
MiamiDadeRECChairman@gm Email Address:	nail.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.

MD-ED 10 (Rev. 6/15)



RECEIVED Access to Handbook and the Election Laws of the State of Florida JUN 20 PM 3:50

Candidate/Chairperson:		ELECTIONS DEPARTMENT
Nelson	D.	Diaz
First Name	Middle Name	Last Name
Miami-Dade County Republic	can Executive Committee Dis	strict 29 Committeeman
	Office Sought / Organiz	zation
l acknowledge that it is requirements described County Elections Departm	in the following resour	read, understand and follow the ces available on the Miami-Dade
Florida, County Laws a	n State Laws and Handbook and Handbooks. Qualifving li	idade.gov/elections/candidate.asp) ks, the Election Laws of the State of information, Electronic Reporting Dates and Recent Legislative Changes.
Florida, County Laws a	n State Laws and Handbook	ade.gov/elections/pacs.asp) ss, the Election Laws of the State of Reporting Dates and Procedures, islative Changes.
Acknowledged by:/	A.	
Date: 6-20-16	Candidate / Chairpe	erson Signature
Primary Telephone Numl	305-591-3840 ber:	
Alternate Telephone Nun	nber:	
miamida E-mail address:	aderecchairman@gmail.com	