

**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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2017 MAY -5 AM 9:54

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)

Lourdes Simon

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

6468 Manor Lane
South Miami, FL 33143

4. Telephone

(305) 608-3737

5. E-mail address

Judge Lourdes Simon
campaign@gmail.com

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

County Court Judge, Group 38

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

Tomas Gamba

11. Mailing Address

2701 Ponce De Leon

12. Telephone

(305) 608-3737

13. City

Coral Gable

14. County

Miami-Dade

15. State

FL

16. Zip Code

33134

17. E-mail address

tgamba@glhlawyers.com

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

19. Name of Bank

Sabadell Bank

20. Address

44 West Flagler Street

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

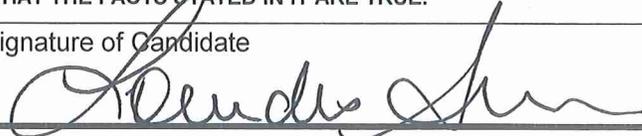
33130

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

5-1-17

26. Signature of Candidate

X 

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

I, Tomas Gamba, do hereby accept the appointment
(Please Print or Type Name)

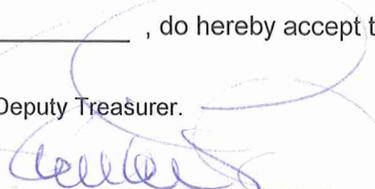
designated above as: Campaign Treasurer Deputy Treasurer.

Date

4.28.2017

X

Signature of Campaign Treasurer or Deputy Treasurer



APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

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Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Lourdes Simon

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

6468 Manor Lane
South Miami, FL 33143

4. Telephone

(305) 608-3737

5. E-mail address

JudgeLourdesSimon
Campaign@gmail.com

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

County Court Judge, Group 38

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

Lourdes Simon

11. Mailing Address

6468 Manor Lande

12. Telephone

(305) 608-3737

13. City

South Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33143

17. E-mail address

JudgeLourdesSimonCampaign@gmail.com

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

19. Name of Bank

Sabadell Bank

20. Address

44 West Flagler Street

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33130

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

May 1, 2017

26. Signature of Candidate

X Lourdes Simon

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

I, Lourdes Simon, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

May 1, 2017

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

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MIAMI-DADE ELECTIONS

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

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1. CHECK APPROPRIATE BOX(ES):

[X] Initial Filing of Form Re-filing to Change: [] Treasurer/Deputy [] Depository [] Office [] Party

2. Name of Candidate (in this order: First, Middle, Last)

Lourdes Simon

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

6468 Manor Lane South Miami, FL 33143

4. Telephone

(305) 608-3737

5. E-mail address

judgelourdessimon@campaign@gmail.com

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

County Court Judge, Group 38

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 [X] Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Karen Jones

11. Mailing Address

6468 Manor Lane

12. Telephone

(305) 608-3737

13. City

South Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33143

17. E-mail address

karenjonesmiami@gmail.com

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

19. Name of Bank

Sabadell Bank

20. Address

44 West Flagler Street

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33130

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

5-1-17

26. Signature of Candidate

[X] Lourdes Simon

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

I, Karen Jones, do hereby accept the appointment (Please Print or Type Name)

designated above as: [] Campaign Treasurer [X] Deputy Treasurer.

5/2/17 Date

[X]

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

(Section 105.031(5), F.S.)

(Please Type)

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MIAMI-DADE
ELECTIONS

I, Lourdes Simon

a judicial candidate, have received, read, and understand the requirements of the Florida Code of Judicial Conduct.



(Signature of candidate)

May 1, 2017

(Date)

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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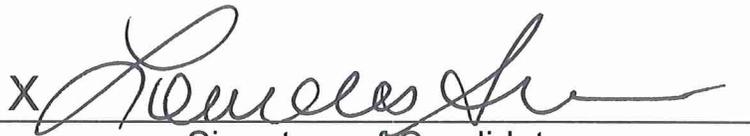
MIAMI-DADE
ELECTIONS

I, Lourdes Simon ,

candidate for the office of County Court Judge, Group 38 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

x 
Signature of Candidate

May 1, 2017
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

Candidate/Chairperson:

Lourdes

Simon

First Name

Middle Name

Last Name

County Court Judge, Group 38

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: May 1, 2017

Primary Telephone Number: 305-608-3737

Alternate Telephone Number: n/a

E-mail address: judgелourdessimoncampaign@gmail.com

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



- Candidate (office sought): County Court Judge, Group 38
Candidate's Florida Voter Registration Number: 109269360
- Political Committee: _____
- Party Executive Committee: _____
- Other: _____

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ELECTIONS

I, Lourdes Simon
(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.

 05/01/2017
Signature of Candidate or Chairperson Date

Day Time Telephone Number: 305-349-7113

Alternate Contact Number: 305-608-3737

Email Address: judgelourdessimoncampaing@gmail.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.