

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

RECEIVED

2017 MAY -5 AM 10:54

**MIAMI-DADE
ELECTIONS**

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

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)

Rebeca Sosa

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

6386 SW 10th Street
Miami, FL 33144

4. Telephone

(305) 266-0546

5. E-mail address

reboso@aol.com

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

County Commission District 6

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

Jarnette G. Rodriguez

11. Mailing Address

1985 NW 88th Court, Suite 101

12. Telephone

(305) 593-2644

13. City

Doral

14. County

Miami-Dade

15. State

FL

16. Zip Code

33172

17. E-mail address

cpazos@rtc-cpa.com

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

19. Name of Bank

Interamerican Bank

20. Address

1000 SW 57th Avenue, #1

21. City

West Miami

22. County

Miami-Dade County

23. State

FL

24. Zip Code

33144

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 5, 2017

26. Signature of Candidate

X [Signature]

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

I, Jarnette G. Rodriguez, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

5/5/17

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

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1. CHECK APPROPRIATE BOX(ES):

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

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

6386 SW 10th Street
Miami, FL 33144

4. **Telephone**
(305) 266-0546

5. **E-mail address**
reboso@aol.com

6. **Office sought** (include district, circuit, group number)
County Commission District 6

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**
Connie M. Pazos

11. **Mailing Address**
1985 NW 88th Court, Suite 101

12. **Telephone**
(305) 593-2644

13. **City**
Doral

14. **County**
Miami-Dade

15. **State**
FL

16. **Zip Code**
33172

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22. **County**
Miami-Dade County

23. **State**
FL

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33144

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25. **Date**
May 5, 2017

26. **Signature of Candidate**
X Rebeca Sosa

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)
I, Connie M. Pazos, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

May 5, 2017
Date

X [Signature]
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, Rebeca Sosa,

candidate for the office of County Commissioner District 6;

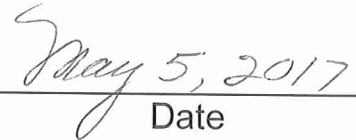
have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



Signature of Candidate



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:

Rebeca

Sosa

First Name

Middle Name

Last Name

County Commissioner District 6

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 5, 2017

Primary Telephone Number: 305-593-2644

Alternate Telephone Number: 305-266-0546

E-mail address: cpazos@rtc-cpa.com

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