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2017 JUL 28 AM 10:30

MIAMI-DADE ELECTIONS

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.

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)
Laura Shearon Cruz

3. Address (include post office box or street, city, state, zip code)
1825 Ponce De Leon Blvd., #206
Coral Gables, Florida 33134

4. Telephone
(305) 607-5042

5. E-mail address
laurashearoncruz@gmail.com

6. Office sought (include district, circuit, group number)
County Court Judge, Group 18

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
Richard F. Puerto

11. Mailing Address
2950 SW 27 Avenue, Suite 100

12. Telephone
(305) 934-4319

13. City
Miami

14. County
Miami-Dade

15. State
FL

16. Zip Code
33133

17. E-mail address
rfp@puertorenfro.com

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

19. Name of Bank
Bank United

20. Address
2159 Coral Way

21. City
Miami

22. County
Miami-Dade

23. State
Florida

24. Zip Code
33145

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
7/26/17

26. Signature of Candidate
 Laura Shearon Cruz

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

designated above as: Campaign Treasurer Deputy Treasurer
07/26/17 Date [Signature] Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

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

(Please Type)

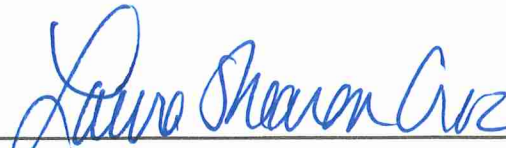
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MIAMI-DADE
ELECTICS

I, Laura Shearon Cruz

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


(Signature of candidate)

7/26/17
(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, Laura Shearon Cruz ,

candidate for the office of County Court Judge, Group 18 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X 
Signature of Candidate

7/26/17
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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Candidate/Chairperson:

MIAMI-DADE
ELECTIONS

Laura

Shearon

Cruz

First Name

Middle Name

Last Name

County Court Judge, Group 18

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: _____

Laura Shearon Cruz

Candidate / Chairperson Signature

Date: _____

7/20/17

Primary Telephone Number: _____

(305) 607-5042

Alternate Telephone Number: _____

N/A

E-mail address: _____

laurashearoncruz@gmail.com

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



Candidate (office sought): Laura Shearon Cruz

Candidate's Florida Voter Registration Number: 115598345

Political Committee: _____

Party Executive Committee: _____

Other: _____

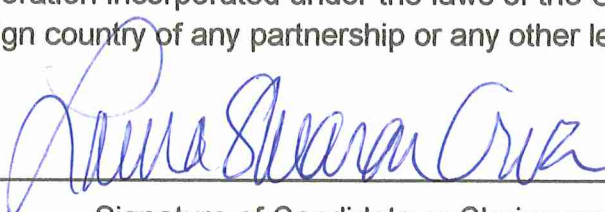
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I, Laura Shearon Cruz
(Please print name of Candidate or Chairperson)

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

7/28/17 _____
Date

Day Time Telephone Number: (305) 607-5042

Alternate Contact Number: N/A

Email Address: LauraShearonCruz@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.