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

2018 FEB -2 PM 4: 57

MIATH-DADE ELECTIONS

OFFICE USE ONLY

officer before opening the	e campa	ign account.							OFFICE	: USE	UNLY
1. CHECK APPROPRIATE Initial Filing of Form		6): -filing to Change:	T	reasu	urer/D	Deputy] Deposito	ry 🔲	Office		Party
2. Name of Candidate (in	2. Name of Candidate (in this order: First, Middle, Last)					dress (includ	le post offic	e box or s	street, city,	state, z	zip
MARK COATS					ode)	OVA/ 400 T		_			
4. Telephone	5. E-mail address			7625 SW 160 TERRACE MIAMI, FL 33157							
(786) 236-4466	markco	rkcoatspresident@yahoo									
6. Office sought (include of	6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if							k if			
MIAMI-DADE COUNTY COMMISSIONER, DISTRI				ICT#	CT #9 applicable: My intent is to run as a Write-In candidate.						
8. If a candidate for a par	tisan off	ce, check block	and fil	l in na	ame	of party as	applicable	: My into	ent is to rur	n as a	
Write-In No	Party Affi	liation	-			7		Pa	rty can	didate.	
9. I have appointed the fo	llowing	person to act as	my	\boxtimes	Can	npaign Treas	surer 🔲	Deput	ty Treasure	er	
10. Name of Treasurer or Deputy Treasurer JOSE A. RIESCO, CPA											
11. Mailing Address 12. Telephone											
RIESCO & COMPANY	RIESCO & COMPANY, LLC, 2600 SOUTH DOUGLAS ROAD, SUITE 900 (305) 445-0777										
13. City 14. County 15. Sta			ate	, , , , , , , , , , , , , , , , , , ,							
CORAL GABLES MIAMI-DADE FL		FL	33134 jose@riescoandcompany.com								
18. I have designated the following bank as my											
19. Name of Bank				20. Address 19455 S DIXIE HIGHWAY							
BB&T				194	55 S		GHWAY				
21. City		22. County	-			23. State			24. Zip C	ode	
MIAMI		MIAMI-DADE				FL			33157		
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				26. 8	Signa	ature of Can	didate				
221	8			X	1	NL					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I,JOSE A. RIESCO, CPA				, do hereby accept the appointment				t			
(Please Print or Type Name)											
designated above as: Campaign Treasurer Deputy Treasurer.											
2/2/18	2/2/18 X										
Date			Signature of Campaign Treasurer or Deputy Treasurer								

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

RESENTED

2018 FEB -2 PM 4: 57

officer before opening the	campai	gn account.						OFFICE	: USE	ONLY
1. CHECK APPROPRIATE BOX(ES):										
	Re-	filing to Change:	☐ Tre	easurer	/Deputy	Deposito	ry 🔲	Office		Party
2. Name of Candidate (in t	2. Name of Candidate (in this order: First, Middle, Last)				ddress (includ	e post offic	e box or s	treet, city,	state, z	zip
MARK COATS				code	•	EDDACE	=			
4. Telephone 5. E-mail address				7625 SW 160 TERRACE MIAMI, FL 33157						
	markco	arkcoatspresident@yahoo								
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if										
MIAMI-DADE COUNTY				CT #9	applicab					
WII/WII-D/ WE GOOTT	001111					My intent i	s to run as	s a Write-Ir	n cand	idate.
8. If a candidate for a part	<u>isan</u> offi	ce, check block	and fill i	n nam	e of party as	applicable	: My inte	ent is to rur	n as a	
Write-In No F	Party Affil	iation					Pa	rty cand	didate.	
9. I have appointed the fo	llowing	person to act as	my [C	ampaign Treas	surer 🔀	Deput	y Treasure	r	
10. Name of Treasurer or D	eputy Tr	easurer								
JEANNINE R. MIRAND	Α									
11. Mailing Address 12. Telephone										
RIESCO & COMPANY, LLC, 2600 SOUTH DOUGLAS ROAD, SUITE 900 (305) 445-0777										
13. City 14. County 15. St			15. Stat	•						
CORAL GABLES MIAMI-DADE FL			FL	3	3134	jen@ries	scoandco	ompany.c	com	
18. I have designated the following bank as my										
19. Name of Bank				20. Ad						
BB&T				19455 S DIXIE HIGHWAY						
21. City		22. County			23. State			24. Zip C	ode	
MIAMI		MIAMI-DADE			FL			33157		
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	10			26. Sic	nature of Can	ndidate				
2/2/18 x										
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
JEANNINE R. MIRANDA					, do her	eby accep	ot the appo	intmer	nt	
(Please Print or Type Name)										
designated above as:		Campaign T	reasurer	Σ	Deputy Tre	easurer.				
2/2/18 X										
Date Signature of Campaign Treasurer or Deputy Treasurer										

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

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2018 FEB - 2 PM 4: 57

MAHI-DADE ELECTIONS

OFFICE USE ONLY

officer before opening the	campai	gn account.							OFFICE	JUL	
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) 3. Address (include post office box or street, city, state, zip								zip			
MARK COATS					ode) 625 (SW 160 T	ERRACE				
4. Telephone	5. E-ma	5. E-mail address			MIAMI, FL 33157						
(786) 236-4466		markcoatspresident@yahoo									
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if								k if			
MIAMI-DADE COUNT	COMI	MISSIONER, [DISTRI	ICT#	#9	applicab	My intent is	s to run as	s a Write-Iı	n candi	idate.
8. If a candidate for a par	tisan offi	ce, check block	and fill	in na	ame d	of party as	applicable:	My inte	ent is to rur	n as a	
Write-In No	Party Affil	iation						Pa	rty cand	didate.	
9. I have appointed the fo	llowing	person to act as	my		Cam	ıpaign Treas	surer 🔀	Deput	y Treasure	r	
10. Name of Treasurer or IMARK COATS	Deputy Tr	easurer									
11. Mailing Address								12. Telep	ohone		
•	7625 SW 160 TERRACE (786) 236-4466										
13. City 14. County 15. Stat				ate							
MIAMI MIAMI-DADE FL				33157 markcoatspresident@yahoo.com							
18. I have designated the following bank as my											
15. Name of Bank			l	20. Address							
BBX1				194	9455 S DIXIE HIGHWAY						
21. City 22. County				23. State 24. Zip Code 51. State 23. State 24. Zip Code 24. Zip Code 25. State 24. Zip Code 25. State 25. State 24. Zip Code 25. State 2							
MIAMI		MIAMI-DADE									
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 2218 26. Signature of Candidate X											
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I,, do hereby accept the appointment						nt					
(Please Print or Type Name)											
designated above as: Campaign Treasurer Deputy Treasurer.											
Date Signature of Campaign Treasurer or Deputy Treasurer											

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

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MINITEDADE ELECTIONS

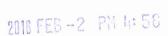
I, MARK COATS

candidate for the office of MIAMI-DADE COUNTY COMMISSIONER, DISTRICT #9; have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

Signature of Candidate

2/2/18 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 FIREWARDS

Candidate/Chairperson:							
MARK	COATS						
First Name	Middle Name	Last Name					
MIAMI-DADE COUN	NTY COMMISSIO	NER, DISTRICT#9					
	Office Sought / Organization						
	the following resources	understand and follow the available on the Miami-Dade					
Florida, County Laws and	ate Laws and Handbooks, the	Election Laws of the State of ation, Electronic Reporting Dates					
Contains information on St Florida, County Laws and	oook (<u>http://www.miamidade.g</u> fate Laws and Handbooks, the Handbooks, Electronic Report mation, and Recent Legislativ	Election Laws of the State of ing Dates and Procedures,					
Acknowledged by:	Candidate / Chairperson	Signature					
Primary Telephone Number:	786-236-4466						
Alternate Telephone Numbe	r: <u>305-445-0777</u>						
E-mail address: markco	oatspresident@yal	noo.com					

Campaign Treasurer's Report Miami-Dade County Electronic Filing Requirement COUNTY



Candidate (office sought): MIAMI DADE COUNTY COMMISSIONER, DISTRICT #9	
Candidate's Florida Voter Registration Number: 109230322	
Political Committee:	
Party Executive Committee:	
Other:	9
I, MARK COATS	<u> </u>
(Please print name of Candidate or Chairperson)	3
understand that Campaign Treasurer's Reports <u>must</u> be filed electronically via the Supervisible Elections website by midnight of the day designated in order to comply with Miami-Dade Contraction requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade Contractions the filing of the campaign finance reports with the Supervisor of Elections were reasoned in that original signed hardcopies are no longer required.	County County ecently
I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade C Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Pr Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Vote by Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in v mail ballot activities, if applicable.	operty y Mai
Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Commissional Miami-Dade County, Florida, Miami-Dade County Elected Officers and Candidates running for Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Council Community Council must now file the Reporting of Solicitation of Contributions for Property Appraiser, Clerk of the Circuit Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Properties (MD-ED 28) to publicly disclose when they commence solicitation activities for Property Appraiser, Clerk of the Circuit Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Properties, and/or 50 organizations, if applicable.	for the Courts Politica Politica Politica
Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that cand for Property Appraiser also fill out the Miami-Dade county Contributing Entity (MD-ED 19) for every reporting period if contributions are received from a corporation incorporated under the last the State of Florida or any other state or any foreign country of any partnership or any other entity other than a natural person, if applicable.	orm for aws of
Signature of Candidate or Chairperson Date	
Day Time Telephone Number: 786-236-4466	
Alternate Contact Number: 305-445-0777	
Email Address: markcoatspresident@yahoo.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.