

**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 JUN 14 PM 3:10

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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)

ELLIOTT NOEL ZACK

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

8370 SW 89th Street
Miami, FL 33156

4. Telephone

(305) 725-1102

5. E-mail address

enzack@aol.com

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

Miami-Dade Community Council 12
Subarea 125

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

McHenry Hamilton

11. Mailing Address

~~9485~~ 9845 SW 72nd Street

12. Telephone

(305) 271-1480

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33173

17. E-mail address

hank@mcHenryHamilton.org

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

19. Name of Bank

BANK OF AMERICA

20. Address

9101 S Dixie Hwy.

21. City

Miami

22. County

Miami-Dade

23. State

FLORIDA

24. Zip Code

33156

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

JUNE 13, 2018

26. Signature of Candidate

Elliott Noel Zack

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

I, McHenry Hamilton, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

June 13, 2018
Date

McHenry Hamilton
Signature of Campaign Treasurer or Deputy Treasurer

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ELLIOTT NOEL ZACK

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

8370 S.W. 89 STREET
MIAMI, FLORIDA 33156

4. Telephone

(305) 725-1102

5. E-mail address

ENZACK@AOL.COM

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

MIAMI-DADE COMMUNITY COUNCIL 12
SUB AREA 12F

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

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10. Name of Treasurer or Deputy Treasurer

ELLIOTT NOEL ZACK

11. Mailing Address

8370 S.W. 89 STREET

12. Telephone

(305) 725-1102

13. City

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14. County

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25. Date

JUNE 14, 2018

26. Signature of Candidate

X 

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

I, ELLIOTT NOEL ZACK, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

JUNE 14, 2018
Date

X 
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 COUNTY
ELECTIONS DEPARTMENT

I, ELLIOTT NOEL ZACK,

candidate for the office of COMMUNITY COUNCIL 12 ^{WOBURN} ₁₂₅;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X 
Signature of Candidate

JUNE 14, 2018
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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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

ELLIOTT NOEL ZACK
First Name Middle Name Last Name

COMMUNITY COUNCIL 12 SUBAREA 125
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)
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by: [Signature]
Candidate / Chairperson Signature

Date: JUNE 14 2018

Primary Telephone Number: 305-725-1102

Alternate Telephone Number: 305-940-0023

E-mail address: ENZACK@AOL.COM

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



Candidate (office sought): COMMUNITY COUNCIL 12 SUBAREA 125

Candidate's Florida Voter Registration Number: 109008818

Political Committee: _____

Party Executive Committee: _____

Other: _____

I, ELLIOTT NOEL ZACK

(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 Vote by Mail Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, if applicable.

Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and 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 Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Political Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)4 organizations, if applicable.

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, if applicable.

Elliott Noel Zack

Signature of Candidate or Chairperson

JUNE 14 2018

Date

Day Time Telephone Number: 305-725-1102

Alternate Contact Number: 305-940-0023

Email Address: ENZACK@AOL.COM

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