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 JUN 19 AM 9: 24

FILAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
☐ Initial Filing of Form Re-filing to Change: ☐ T	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last) 4. Telephone 5. E-mail address 786) 234-3635 PARICIOTPMOTER	3. Address (include post office box or street, city, state, zip code) 6520 NW 114 TH AVE MIH1624 MONAL FL 33178
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
County CommissionERD 35 to	applicable: My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> office, check block and fil	I 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	
11. Mailing Address 6520 NW 1/4TH NE# 1624	12. Telephone 12. Telephone 12. Telephone
13. City) ORA (14. County M (AM) 15. St.	ate 16. Zip Code 17 E-mail address
18. I have designated the following bank as my	Primary Depository Secondary Depository
19. Name of Bank	20. Address 35 TH LN
21. City 22. County MIAA	15 C 24. Zip Code 33 17-2
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 / 16	26. Signature of Candidate
0/19/17	X
Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
(Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasure	Pr Deputy Treasurer.
6/10/17 X	
\	Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF **CANDIDATE**

(Section 106.023, F.S.) (Please print or type)

OFFICE USE ONLY RECEIVED

2018 JUN 19 AM 9: 24

MIAHI-DADE COUNTY ELECTIONS DEPARTMENT

candidate for the office of LOUN

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

X Signature of Candidate

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 2018 JUN 19 AM 9: 24 Access to Hariubook and Election Laws of the State of Florida HIAMI-DADE COUNTY ELECTIONS DEPARTMEN

Sandidata/Chairmaraan
Candidate/Chairperson:
VATRICIO MONENO
First Name Middle Name Last Name
County Counissisonen Dist 12
Office Sought / Organization
acknowledge that it is my responsibility to read, understand and follow the
equirements 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.
Asknowledged by
Acknowledged by:Candidate / Chairperson Signature
Date:
Primary Telephone Number: 786-234-3635
Alternate Telephone Number: <u>786-234-3635</u>
E-mail address: Patricio 7PM@ GMAi (Com

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



Candidate (office sought): COUNTY COMMISSIONER DIST #12
Candidate's Florida Voter Registration Number: 118188259
Political Committee:
Party Executive Committee:
Other:
HATRICIO MONENO
(Please print name of Candidate or Chairperson) understand that Campaign Treasurer's Reports <u>must</u> 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. Signature of Candidate or Chairperson Date
Oignature of Carididate of Chairperson
Day Time Telephone Number: $786-234-3635$
Alternate Contact Number: 786-234-3635
Email Address: 6520 UW 114TH AVE # 1624 DONA (FC 3317-8

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.