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ACKNOWLEDGEMENT FOR CANDIDATES WITH THE OPTION TO OPEN A CAMPAIGN ACCOUNT



(Community Development District and South Dade/Soil and Water Conservation District)
ELECTIONS DEPARTMENT

| Name: Angel E. Quin APALLO II (Print name of Candidate) |
|---|
| (Print name of Candidate) |
| Office Sought: |
| Community Development District: EAST HOMESTEAD COD SOAT # |
| South Dade Soil and Water Conservation – Group: |
| Campaign Account: |
| I <u>AM</u> going to open a campaign account during my candidacy. |
| · |
| understand that, before opening a campaign account, I am required to file all the requisite forms for this office with the Elections Department. I also understand that a Campaign Treasurer's Report <u>must</u> be filed electronically via the Supervisor of Elections website at <u>www.miamidade.gov/elections/campaignreports</u> by midnight on the day designated as per F.S. 106.0702(1) and in order to comply with Miami-Dade County requirements. |
| I AM NOT going to open a campaign account during my candidacy. I, Pingel (Print name of Candidate) will not be opening a campaign account. However, I understand that, in the event I choose to do so at a later date, I am required to file the requisite forms for this office with the Elections Department before opening the account. I also understand that a Campaign Treasurer's Report must be filed electronically via the Supervisor of Elections website at www.miamidade.gov/elections/campaignreports by midnight on the day designated as per F.S. 106.0702(1) and in order to comply with Miami-Dade County requirements. |
| Signature of Candidate Date |

MIAMI-DADE COUNTY

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Access to Handbook and the Election Laws of the State of FloridaUN 21 AM 10: 54

| | | | ELECTION | S DEPARTMENT | |
|---|--|---|-----------------------|------------------|---------------|
| Candidate/Chairpers | on: | | | - Little Till | |
| Angel | | EDISON | QUINAPALLO | | |
| First Name | | Middle Name | Last Name | | |
| /= 4 | 1/ | () > > | | 4.4 | |
| EAST | HOMESTEAD | CDD | SEAT | #4 | |
| l acknowledge tha requirements desc County Elections De | t it is my res _l ribed in the fo | Sought / Organization ponsibility to read, llowing resources a te: | underst available | and and follo | w th i-Dad |
| Contains inform Florida, County | nation on State Lav Laws and Handbo | http://www.miamidade. ws and Handbooks, the ooks, Qualifying Informa date Information, and R | Election Lation, Elec | aws of the State | of Dates |
| Contains inform Florida, County | ation on State Lav Laws and Handbo | tp://www.miamidade.go vs and Handbooks, the ooks, Electronic Reporti and Recent Legislative | Election Ling Dates | aws of the State | of |
| Acknowledged by | Ca | ndidate / Chairperson | Signature | | |
| | | 786-355-29 | 134 | | |
| Alternate Telepho | ne Number: | 786-355-5 | 335 | - | |
| F-mail address: | Angel @ | GULNIAVALLE . | DM | | |