

**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.**

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2019 FEB -8 PM 2: 28

MIAMI-DADE
ELECTIONS

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)

Raquel A. Regalado

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

987 SW 37th Ave
Apt 909
Miami, FL 33135

4. Telephone

(305) 529-5440

5. E-mail address

raquelregaladopa@gmail.com

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

Miami-Dade County Commissioner District 7

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

Carlos M. Trueba

11. Mailing Address

2600 Douglas Road, Suite 800

12. Telephone

(305) 529-5440

13. City

Coral Gables

14. County

Miami-Dade

15. State

Florida

16. Zip Code

33134

17. E-mail address

cpazos@gemrtcpa.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

BankUnited

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

2/6/2019

26. Signature of Candidate

X

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

I, Carlos M. Trueba, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

Date

2/08/19

X

Signature of Campaign Treasurer or Deputy Treasurer

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Raquel A. Regalado

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987 SW 37th Avenue
Apt 909
Miami, FL 3135

4. Telephone

(305) 529-5440

5. E-mail address

raquelregaladopa@gmail.com

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Miami-Dade County Commissioner District 7

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☐ 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

Connie M. Pazos

11. Mailing Address

2600 Douglas Road, Suite 500

12. Telephone

(305) 529-5440

13. City

Coral Gables

14. County

Miami-Dade

15. State

Florida

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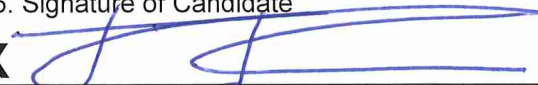
33145

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25. Date

Feb 6, 2019

26. Signature of Candidate

X 

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

I, Connie M. Pazos, do hereby accept the appointment
(Please Print or Type Name)

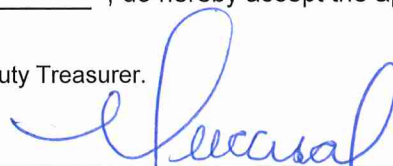
designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

Date

2/08/19

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
ELECTIONS

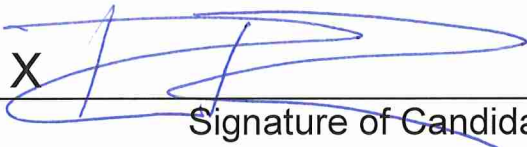
I, Raquel A. Regalado,

candidate for the office of Miami-Dade County Commissioner District 7 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



Signature of Candidate

2-6-2019

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-DE
ELECTIONS

Candidate/Chairperson:

Raquel Anora Regalado
First Name Middle Name Last Name

County Commissioner Dist 7
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: [Signature]
Candidate / Chairperson Signature

Date: Feb 8, 2019

Primary Telephone Number: 305-529-5440

Alternate Telephone Number: _____

E-mail address: raquelregalado@gmail.com

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



☒ Candidate (office sought): Miami-Dade County Commissioner District 7

Candidate's Florida Voter Registration Number: 110015425

☐ Political Committee: _____

☐ Party Executive Committee: _____

☐ Other: _____

I, Raquel A. Retalado

(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.



Signature of Candidate or Chairperson

2-6-2019

Date

Day Time Telephone Number: 305-529-5440

Alternate Contact Number: _____

Email Address: cpazos@gemrtcpa.com

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