#### **APPOINTMENT OF CAMPAIGN TREASURER** AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

### RECEIVED

2019 APR -8 AM II: 33

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	MIAMI-DADE LE USE ONLY	
1. CHECK APPROPRIATE BOX(ES):	ELECTIONS	
/	reasurer/Deputy 🔲 Depository 🔲 Office 🔲 Party	
2. Name of Candidate (in this order: First, Middle, Last) 4. Telephone 5. E-mail address	3. Address (include post office box or street, city, state, zip code) 5901 MOSS RANCH RD PINECREST, FL 33 15 Co	
(305)9923Y3B	/	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if	
County Commission, District	applicable:  My intent is to run as a Write-In candidate.	
8. If a candidate for a <u>partisan</u> 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		
11. Mailing Address 5. W. 121 Street 200	12. Telephone BOS) 215 - DDUO	
13. City 14. County Dade FC	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 AMERICA	20, Address S. Dixie Highway	
21. City 22. County Mami Dad	23. State 24. Zip Code 33/56	
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 4/8/19	X W W W W W W W W W W W W W W W W W W W	
27. Treasurer's Acceptance of Appointmen	t (fill in the blanks and check the appropriate block)	
I, (SARY WINSTON (Please Print of Type Name)	, do hereby accept the appointment	
designated above as: Campaign Treasure	Deputy Treasurer	
<i>埠</i> / X	CASUTY	
Date	Signature of Campaign Treasurer or Deputy Treasurer	
70 77 - (7)	Rule 1S-2,0001, F.A.C.	

DS-DE 9 (Rev. 10/10)

### APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

2019 APR -8 AM II: 34

MIAMI-DADE ELECTIONS

RECEIVED

NOTE: This form must be on file with the qualifying OFFICE USE ONLY officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): Depository Office Party Initial Filing of Form Re-filing to Change: Treasurer/Deputy 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) 5901 MOSS RANCH RD. PINECREST, FL 33156 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circulit, group number) 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 candidate. **Party** Write-In No Party Affiliation **Deputy Treasurer** Campaign Treasurer 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer LISA DONLINA 11. Mailing Address 2807 Ambergate Rd (813)728-4293 16. Zip Code 17. E-mail address 32792 IISA. DWIING OSTEVINS DUNING. COM 13. City
WINTER PARK
01 ANGE 15. State **Primary Depository** Secondary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address 22. County 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. 26. Signature of Candidate 25. Date Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. LISA DOWLING , do hereby accept the appointment (Please Print or Type Name) Deputy Treasurer. Campaign Treasurer designated above, as: Signature of Campaign Treasurer or Deputy Treasurer

Rule 1S-2.0001, F.A.C.

# STATEMENT OF CANDIDATE

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

OFFICE USE ONLY

RECEIVED

2019 APR -8 AM II: 34

MIAMI-DADE ELECTIONS

candidate for the office of

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

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).

DS-DE 84 (05/11)



## Access to Handbook and the Election Laws of the State of Florida

RECEIVED

2019 APR -8 AM 11: 34

2019 AFR -0 ABTT- 0
Candidate/Chairperson:
First Name Middle Name Last Name
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 ( <a href="http://www.miamidade.gov/elections/candidate.asp">http://www.miamidade.gov/elections/candidate.asp</a> ) 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 ( <a href="http://www.miamidade.gov/elections/pacs.asp">http://www.miamidade.gov/elections/pacs.asp</a> )  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:  Candidate / Chairperson Signature
Date:
Primary Telephone Number: 305 993-3435
Alternate Telephone Number: 305 615 3864
E-mail address: Mayor lynds agmails com

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



	7
Candidate (office sought):_  Candidate (office sought):_	!
Candidate's Florida Voter Registration Number: 109034823	
Political Committee:	
Party Executive Committee:	
Other:	
I, CINDY LERNER	
(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.  Day Time Telephone Number:  Alternate Contact Number:  Alternate Contact Number:  Email Address:  Multiplication of the Code of Miami-Dade Country requires that candidates for Property 19.00 and 19.00 form for every reporting Entity (MD-ED 19) form for every	
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.	

MD-ED 10 (Rev. 10/17)

2019 APR -8 AM II: 34 RECEIVED