

**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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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)

Marie-Flore Lindor-Latorre

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

P.O. Box 972234  
Miami, Fla 33197

**4. Telephone**

(305) 908 2428

**5. E-mail address**

electdrflores2020@gmail.com

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

Miami Dade County School Board / District 17

**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**

Pierre Vilme

**11. Mailing Address**

4330 W Broward Blvd # D

**12. Telephone**

( )

**13. City**    **14. County**    **15. State**    **16. Zip Code**    **17. E-mail address**  
Plantation    Broward    Fla    33317    pvilme@maroonep.com

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

**19. Name of Bank**

Bank of America

**20. Address**

11205 S Dixie Hwy

**21. City**    **22. County**    **23. State**    **24. Zip Code**  
Pinecrest    Dade    Fla    33158

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**

8/8/19

**26. Signature of Candidate**

X Marie-Flore Lindor-Latorre

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

I, Pierre Vilme, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

8/8/19  
Date

X

Signature of Campaign Treasurer or Deputy Treasurer