

**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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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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)

Rafael Etzion

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

4931 Fisher Island Dr
Miami Beach, FL 33109

4. Telephone

(516) 528 4567

5. E-mail address

retzion@metrosinc.com

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

Community Council - Area 16 - Sub. 16/E

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

Rafael Etzion

11. Mailing Address

4931 Fisher Island Dr. Miami Beach, FL 33109

12. Telephone

(516) 528 4567

13. City

Miami Beach

14. County

Dade

15. State

FL

16. Zip Code

33109

17. E-mail address

RETZION@METROSINC.COM

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Regions

20. Address

4113 Fisher Island Dr.

21. City

Fisher Island

22. County

23. State

FL

24. Zip Code

33109

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

3/8/2020

26. Signature of Candidate

X Rafael Etzion

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

I, Rafael Etzion (Please Print or Type Name), do hereby accept the appointment

designated above as:

Campaign Treasurer Deputy Treasurer.

3/8/2020
Date

X Rafael Etzion
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 COUNTY
ELECTIONS DEPARTMENT

I, Rafael Etzion,
candidate for the office of Community Cancile - Area 16 - Sub 16E;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Rafael Etzion
Signature of Candidate

3/8/2020
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-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Rafael Etzion
First Name Middle Name Last Name

Community Council - Area 16 Sub 161E
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:

- [X] Candidate Qualifying Handbook (http://www.miamidade.gov/elections/candidate.asp)
[] Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by: [Signature]
Candidate/Chairperson Signature

Date: 3/8/2020

Primary Telephone Number: 516-528-4567

Alternate Telephone Number:

E-mail address: retzion@metrosinc.com

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



Candidate (office sought): Community Council area 16 / Sub Area 161-5
Candidate's Florida Voter Registration Number _____

Political Committee: _____

Party Executive Committee: _____

Other: _____

I, Rafael Etzion
(Please print name of Candidate or Chairperson)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

I 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.

Rafael Etzion
Signature of Candidate or Chairperson

5/30/2020
Date

Day Time Telephone Number: 516-528-4567

Alternate Contact Number: _____

Email Address: retzion@metro.sinc.com

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.