#### 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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MIAHIDADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): ✓ Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office → Partv 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip LIZZET MARTINEZ 1351 NW 12TH STREET, SUITE #610 4. Telephone MIAMI, FL 33125 5. E-mail address LIZZETM72@GMAIL.COM (305)510-4424 6. **Office sought** (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if COUNTY COURT JUDGE, 11TH JUD, CIR., GROUP 32 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 X Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer ROBERT F. DAMIAN 11. Mailing Address 12. Telephone 2372 NW 7TH STRET (305)510-4424 13. City 14. County 15. State 16. Zip Code 17. E-mail address MIAMI MIAMI-DADE FL 33125 DAMIAN@DAMIANLAWPA.COM 18. I have designated the following bank as my Secondary Depository 19. Name of Bank 20. Address INTERAMERICAN BANK 9190 CORAL WAY 21. City 22. County 23. State 24. Zip Code MIAMI 33165 MIAMI-DADE FL 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. ROBERT F. DAMIAN , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer. Deputy Treasurer. X Signature of Campaign Treasurer or Deputy Treasurer

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

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officer before opening the campaign account.						OF	FFICE USE ONLY		
1. CHECK APPROPRIATE BOX(ES):									
	Re-filing to Change:	Tre	asurer/[		Depository	Offic			
2. Name of Candidate (in this order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip code)						
LIZZE I MAR	LIZZET MARTINEZ			1351 NW 12TH STREET, SUITE #610					
. Telephone 5. E-mail address			MIAN	/II, FL 3312	25				
(305)510-4424	LIZZETM72@GMAIL	COM							
6. Office sought (include district, circuit, group number) COUNTY COURT JUDGE, 11TH JUD. CIR., GROUP 32 7. If a candidate for a nonpartisan office, check if applicable:							office, check if		
COUNTY COURT JUL	JGE, THE JOD. CIK	., GROC	JP 32	applicat		run as a W	/rite-In candidate.		
My intent is to run as a Write-In candidate.									
8. <b>If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable:</b> My intent is to run as a									
Write-In No F	Party Affiliation			N 200 - 1004 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 -		_ Party	candidate.		
9. <b>I have appointed the following person to act as my</b> Campaign Treasurer 🔀 Deputy Treasurer									
10. Name of Treasurer or Deputy Treasurer  LIZZET MARTINEZ									
11. Mailing Address						12. Telepho			
1351 NW 12TH	I STREET, SU	IITE #	<i>‡</i> 610			(30S)	5104424		
13. City MIAMI				e 16. Zip Code 17. E-mail address LIZZETM72@GMAIL.COM					
18. <b>I have designated the following bank as my</b> Primary Depository   Secondary Depository						Depository			
			20. Address 9190 CORAL WAY						
21. City	22. County			23. State			Zip Code		
MIAMI	MIAMI-DAE	DE		FL		331	165		
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 3/1/2023			26. Signature of Candidate						
3/'/'			X						
27. Treasur	er's Acceptance of Appo	ointment	(fill in th	e blanks and	check the appr	opriate blo	ick)		
I, LIZZET MARTINEZ					, do hereby	accept the	appointment		
(Please Print or Type Name)									
designated above as: Campaign Treasurer. Deputy Treasurer.									
3/1/2023 X									
Date Signature of Campaign Treasurer or Deputy Treasurer									

## STATEMENT OF CANDIDATE FOR JUDICIAL OFFICE

(Section 105.031(5), F.S.) (Please Type)

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MIAHI DADE COUNTY ELECTIONS DEPARTMENT

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LIZZET MARTINEZ
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a judicial candidate, have received, read, and understand the requirements of the Florida Code of Judicial Conduct.

(Signature of candidate)

(Date)

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.

## STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

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I, LIZZET MARTINEZ

candidate for the office of 11th Jud. Circuit, County Court Judge, Group 32

have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

Signature of Candidate

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 RECEIVED Election Laws of the State of Floglida AR - 1 PM 1: 29

FLECTIONS DEPARTMENT

		ELECTIONS DEPARTMENT
Candidate/Chairperson:		
LIZZET		MARTINEZ
First Name	Middle Name	Last Name
COUNTY COURT JUDGE	, GROUP 32,	11TH JUD. CIRCUIT
Office	e Sought / Organizat	ion
I acknowledge that it is my res requirements described in the fo County Elections Department Webs	ollowing resource	
	ws and Handbooks, ooks, Qualifying Info	the Election Laws of the State of ormation, Electronic Reporting Dates
Political Committee Handbook  (https://www.miamidade.gov/glob Contains information on State La Florida, County Laws and Handb Important Committee Information	nws and Handbooks, books, Electronic Re <sub>l</sub>	the Election Laws of the State of porting Dates and Procedures,
Asknowledged by:		
Acknowledged by:  Date: 3 / 2023	Candidate / Chairpers	son Signature
/ /	05) 548-519	
Primary Telephone Number: (3	00) 010 010	
Alternate Telephone Number:	305) 510-442	24
E-mail address: LIZZETM7	2@GMAIL.0	COM

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



County Count Judge Croup 22 11th Jud Cir	
Candidate (office sought): County Court Judge, Group 32, 11th Jud. Cir.	
Candidate's Florida Voter Registration Number:	
Political Committee:	
Party Executive Committee:	
Other:	
(Please print name of Candidate or Chairperson)	
understand that Campaign Treasurer's Reports <u>must</u> be filed electronically via the Supervisor Elections website by midnight of the day designated in order to comply with Miami-Dade Courequirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade Couregarding the filing of the campaign finance reports with the Supervisor of Elections were received amended in that original signed hardcopies are no longer required.	inty inty
I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade Courflorida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Proper Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Vote by Mayor Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote mail ballot activities, if applicable.	erty Mail
Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code Miami-Dade County, Florida, Miami-Dade County Elected Officers and Candidates running for Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit County and Community Council must now file the Reporting of Solicitation of Contributions for Polit Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Polit Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Polit Committees, Electioneering Communications Organizations, Political Parties, and/or 501 organizations, if applicable.	the urts, tical tical tical
Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that candidate for Property Appraiser also fill out the Miami-Dade county Contributing Entity (MD-ED 19) form every reporting period if contributions are received from a corporation incorporated under the laws the State of Florida or any other state or any foreign country of any partnership or any other lentity other than a natural person, if applicable.	for s of
3/1/2023	
Signature of Candidate or Chairnerson  Date	
Signature of Candidate or Chairperson Date	
Day Time Telephone Number: (305) 548-5197	
Day Time Telephone Number: (305) 548-5197  Alternate Contact Number: (305) 510-4424	
LIZZETNIZZ@CNIAIL CONI	
Email Address: LIZZE I IVI / Z@GIVIAIL.COIVI	

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.