

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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09 NOV 19 AM 10: 12

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee

Miami-Dade County Democratic Executive Committee

Telephone

305-477-4994

Mailing Address (include city, state and zip code)

1200 NW 78th Avenue, Suite 214, Doral, FL 33126

Street Address (include city, state and zip code)

Same as above

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or
Connected Organization

Mailing Address

Relationship

3. Area, Scope and Jurisdiction of the Committee

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Full Name

Mailing Address

Committee Title or Position

Paul Barthole
Gabriel Mendoza

1200 NW 70th Ave, Suite 214
Doral, Florida 33126

Treasurer
Deputy Treasurer

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)

| Full Name | Mailing Address | Committee Title or Position |
|---------------------|--|-----------------------------|
| Richard J. Lydecker | 1201 Brickell Avenue, 5th Floor, Miami, Florida 33131 | Chairman |

7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)

| Full Name | Mailing Address | Office Sought | Party |
|-----------|-----------------|---------------|-------|
| | | | |

8. List Any Issues this Committee is Supporting:

List Any Issues this Committee is Opposing:

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party

The Democratic Party

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?

The Florida Democratic Party

11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds

| Name of Bank or Depository & Account Number | Mailing Address |
|---|--|
| Bank United | 13705 Biscayne Boulevard North Miami Beach, Florida 33181 |

12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any

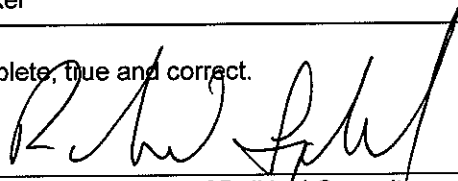
| Report Title | Dates Required to be Filed | Name & Position of Official | Mailing Address |
|--------------|----------------------------|-----------------------------|-----------------|
| | | | |

STATE OF Florida Miami-Dade COUNTY

I, Richard J. Lydecker, certify that the information in this Statement of

Organization is complete, true and correct.

X


Signature of Chairman of Political Committee

Nov 18, 2009
Date

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 ELECTIONS DEPARTMENT

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR POLITICAL
COMMITTEES AND ELECTIONEERING
COMMUNICATION ORGANIZATIONS**
(Sections 106.011(1) and 106.021(1), F.S.)

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment of Treasurer

Reappointment of Treasurer

Deputy Treasurer

1. Committee or Organization

MIAMI-DADE DEMOCRATIC
EXECUTIVE COMMITTEE

2. Account Number

3. Telephone

(305) 477-4994

4. Name of Treasurer or Deputy Treasurer

PAUL A. BARTHOLE

5. Email (optional)

DECTREASURER@gmail.com

6. Telephone (optional)

()

7. Mailing Address

1200 NW 78 AVE STE. 214 DORAL, FL 33126

8. Street Address

SAME

9. The following bank has been designated as the

Primary Depository

Secondary Depository

10. Name of Bank

BANK UNITED

11. Street Address

13705 BISCAYNE BLVD
M. MIA. BCL. FL 33181

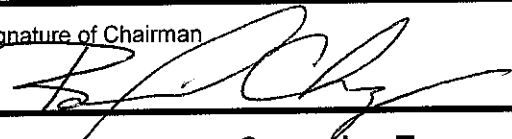
12. City

13. State

14. Zip Code

15. Signature of Chairman

X



16. Name of Chairman (Print or Type)

Benjamin J. Chiszar

Campaign Treasurer's Acceptance of Appointment

I, PAUL A. BARTHOLE

(Please Print or Type)

, do hereby accept the appointment as

treasurer or deputy treasurer for

MIAMI-DADE DEMOCRATIC EXECUTIVE COMMITTEE

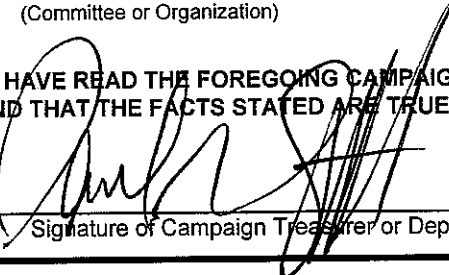
(Committee or Organization)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

1/30/09

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR POLITICAL
COMMITTEES AND ELECTIONEERING
COMMUNICATION ORGANIZATIONS**
(Sections 106.011(1) and 106.021(1), F.S.)

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

| | | | |
|---|------------------------|---|---|
| 1. Committee or Organization <i>MIAMI-DADE COUNTY DEMOCRATIC EXECUTIVE COMMITTEE</i> | | 2. Account Number | 3. Telephone <i>(305) 477-4994</i> |
| 4. Name of Treasurer or Deputy Treasurer <i>GABRIEL MENDOZA</i> | | 5. Email (optional) <i>DELTREASURER@GMAIL.COM</i> | 6. Telephone (optional) |
| 7. Mailing Address <i>1200 NW 78TH AVE STE 214 DORAL, FL. 33126</i> | | | |
| 8. Street Address <i>1200 NW 78TH AVE STE 214 DORAL, FL. 33126</i> | | | |
| 9. The following bank has been designated as the | | <input checked="" type="checkbox"/> Primary Depository | <input type="checkbox"/> Secondary Depository |
| 10. Name of Bank <i>BANK UNITED</i> | | 11. Street Address <i>13705 BISCAYNE BLVD.</i> | |
| 12. City <i>NORTH MIAMI BEACH</i> | 13. State <i>FL</i> | 14. Zip Code <i>33181</i> | |
| 15. Signature of Chairman <i>X [Signature]</i> | | 16. Name of Chairman (Print or Type) <i>Benjamin John Chisza</i> | |

Campaign Treasurer's Acceptance of Appointment

I, *GABRIEL MENDOZA*, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for *MIAMI DADE COUNTY DEMOCRATIC EXECUTIVE COMMITTEE*.
(Committee or Organization)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

1/30/09 Date *X [Signature]* Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR POLITICAL
COMMITTEES AND ELECTIONEERING
COMMUNICATION ORGANIZATIONS**
(Sections 106.011(1) and 106.021(1), F.S.)

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

| | | |
|---|-------------------|---------------------------------|
| 1. Committee or Organization Miami-Dade Democratic Executive Committee | 2. Account Number | 3. Telephone (305) 477-4994 |
|---|-------------------|---------------------------------|

| | | |
|---|---------------------|--------------------------------|
| 4. Name of Treasurer or Deputy Treasurer Barbara Schindler | 5. Email (optional) | 6. Telephone (optional) () |
|---|---------------------|--------------------------------|


7. Mailing Address
1200 NW 78th Ave, Suite 214 Doral, FL 33126

8. Street Address

9. The following bank has been designated as the Primary Depository Secondary Depository

| | |
|---------------------------------|---|
| 10. Name of Bank Bank United | 11. Street Address 13705 Biscayne Blvd |
|---------------------------------|---|

| | | |
|-------------------------------|----------------------|-----------------------|
| 12. City North Miami Beach | 13. State Florida | 14. Zip Code 33181 |
|-------------------------------|----------------------|-----------------------|

| | |
|--|---|
| 15. Signature of Chairman  | 16. Name of Chairman (Print or Type) Benjamin John Chiszar |
|--|---|

Campaign Treasurer's Acceptance of Appointment

I, Barbara Schindler, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Miami-Dade Democratic Executive Committee
(Committee or Organization)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

02/25/09
Date


Signature of Campaign Treasurer or Deputy Treasurer