

**STATE OF FLORIDA  
APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

**OFFICE USE ONLY**  
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2010 JUN 10 PM 12:08

MIAMI DADE  
ELECTIONS

**1. CHECK APPROPRIATE BOX:**

Original Appointment      Change in:     Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

Jose "Pepe" Diaz

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

10211 SW 6th Street  
Sweetwater, FL 33174

**4. Telephone** (optional)

(      )

**5. E-mail address** (optional)

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

County Commissioner District 12

**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**

Carlos M. Trueba, CPA

**11. Mailing Address** (If post office box or drawer, also include street address)

1985 NW 88th Court, Suite #101

**12. Telephone**

( 305 ) 593-2644

**13. City**

Doral

**14. County**

Miami-Dade

**15. State**

Florida

**16. Zip Code**

33172

**17. E-mail address** (optional)

cpazos@rtc-cpa.com

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

**19. Name of Bank**

City National Bank

**20. Street Address**

8725 NW 18th Terrace

**21. City**

Miami

**22. County**

Miami-Dade

**23. State**

Florida

**24. Zip Code**

33172

**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**

6/07/10

**26. Signature of Candidate**

**X** 

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

I, Carlos M. Trueba, CPA     do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

6/07/10

Date

**X** 

Signature of Campaign Treasurer or Deputy Treasurer

Receipt of Handbook and the  
Election Laws of the State of Florida



MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

Candidate/Chairperson:

Jose                      "Pepe"                      Diaz  
 First Name                      Middle Name                      Last Name

County Commission District 12  
 Office Sought / Organization

This is to acknowledge my receipt of the following documents:

Handbooks Available	Edition	Downloaded from Internet	CD-Rom	Other
The Election Laws of the State of Florida		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	

Received by: [Signature]  
 Candidate/Chairperson Signature

Date: 6/14/10

Phone No.: 305-593-2644

Fax No.: 305-593-0390

E-mail address: cpazos@rtc-cpa.com

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)  
(Please Type)

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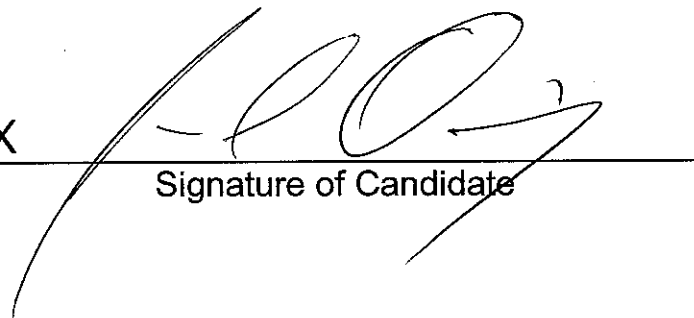
09 FEB 20 PM 12:36

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

I, Jose "Pepe" Diaz,  
candidate for the office of Commissioner District 12 ;

have received, read and understand the requirements of Chapter 106,  
Florida Statutes.

X

  
\_\_\_\_\_  
Signature of Candidate

2/19/09  
\_\_\_\_\_  
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).



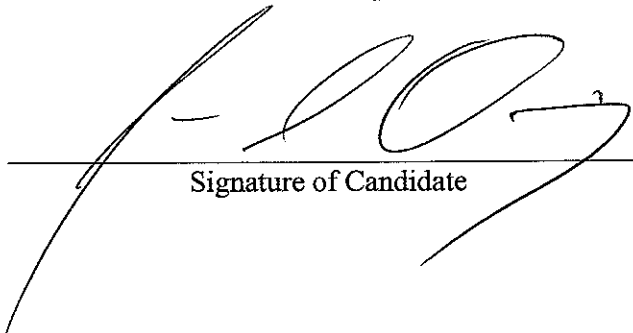
**Campaign Treasurer's Report  
Filing Requirement  
Electronic Filing Statement  
For Miami-Dade County Candidates**

RECEIVED  
09 FEB 20 PM 12:36  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

I, Jose "Pepe" Diaz, candidate for the office of Commissioner District 12, have received, read, and understand the Miami-Dade County policy regarding Campaign Treasurer's Reports for Miami-Dade Mayor, County Commission, and Community Council candidates.

In order to comply with the requirement I declare that I understand that Campaign Treasurer Reports be filed electronically simultaneously with and in addition to the original signed report, I further declare that:

I will use the software provided by the Supervisor of Elections.

  
\_\_\_\_\_  
Signature of Candidate

2/19/09  
\_\_\_\_\_  
Date

Day Time Phone No.: 305-593-2644

E-mail address: cpazos@rtc-cpa.com

**LOYALTY OATH FOR MIAMI-DADE COUNTY  
COUNTY COMMISSIONER**

(Sections 876.05-876.10, Florida Statutes)

RECEIVED

2010 JUN 10 PM 12:08

STATE OF FLORIDA Miami-Dade County

I,	Jose	"Pepe"	MIAMI DADE Diaz ELECTIONS
	First Name	Middle Name/Initial	Last Name

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

**OATH OF CANDIDATE**

(Section 99.021, Florida Statutes)

I, Jose "Pepe" Diaz  
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)  
 am a candidate for the office of **Miami-Dade County Commissioner** District 12

I am a qualified elector of **Miami-Dade County**, Florida; I am qualified under the Constitution and the Laws of Florida and the Home Rule Charter of Miami-Dade County to hold the office to which I desire to be nominated or elected. I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes.

**CANDIDATE CERTIFICATION**

I, hereby, certify that I am a qualified elector of Miami-Dade County, and that I have been a resident elector of Miami-Dade County for at least three (3) years and resident of the District at least six (6) months prior to qualifying. I am submitting a copy of the following as proof of my residency in the district for the prescribed period:

- driver's license     
  property tax receipt     
  homestead exemption receipt  
 utility bill     
  lease agreement

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.**

<b>X</b>		305-593-2644	cpazos@rtc-cpa.com
	Signature of Candidate	Daytime Telephone Number	Email Address

Address: 10211 SW 6th Street City Sweetwater State Florida Zip Code 33172

I, the candidate whose name appears above, do affirm that I meet the minimum residency requirements for this office and that the information provided on this form and any attachments hereto are true.

State of Florida,  
County of Miami-Dade

Sworn to (or affirmed) and subscribed before me this 7 day of June, 2010 by

Personally Known:  or  
 Produced Identification: \_\_\_\_\_  
 Type of Identification Produced:  
 \_\_\_\_\_

Signature of Notary Public – State of Florida  
 Print, Type or Stamp Commissioned Name of Notary Public

