

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

RECEIVED
2010 JUN 14 AM 8:40

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. CHECK APPROPRIATE BOX:

☒ Original Appointment Change in: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

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

Richard M. Gomez

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

10040 SW 33 Street
Miami, FL 33165

4. Telephone (optional)

(305) 551-9708

5. E-mail address (optional)

rgomez@tgsv.com

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

Community Council District 10 Subarea 103

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

Mary V. Tatum

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

1301 W 68 Street Hialeah, FL

12. Telephone

(305) 823-5755

13. City

Hialeah

14. County

Miami Dade

15. State

FL

16. Zip Code

33014

17. E-mail address (optional)

gtat@tgsv.com

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

19. Name of Bank

Sabadell United

20. Street Address

1751 W 49 Street

21. City

Hialeah

22. County

Miami Dade

23. State

FL

24. Zip Code

33012

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

6/10/2010

26. Signature of Candidate

X 

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

I, Mary V. Tatum, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

6/10/2010
Date

X

Mary V. Tatum
Signature of Campaign Treasurer or Deputy Treasurer

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

1. CHECK APPROPRIATE BOX:

☒ Original Appointment Change in: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

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

RICHARD M GOMEZ

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

10040 SW 33 STREET
MIAMI, FL 33165

4. Telephone (optional)

(305) 551 9708

5. E-mail address (optional)

RGOMEZ@CTBSV.COM

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

COMMUNITY COUNCIL 10 SUBDISTRICT 103

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

RICHARD GOMEZ

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

10040 SW 33 ST. MIAMI, FL 33165

12. Telephone

(305) 551 9708

13. City

MIAMI

14. County

MIAMI DADE

15. State

FL

16. Zip Code

33165

17. E-mail address (optional)

RGOMEZ@CTBSV.COM

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

19. Name of Bank

SUNBANK UNITED

20. Street Address

1751 W 49 STREET

21. City

MIAMI

22. County

MIAMI DADE

23. State

FL

24. Zip Code

33012

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

6/14/2010

26. Signature of Candidate

X 

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

I, RICHARD GOMEZ, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer ☒ Deputy Treasurer.

6/14/10
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY
RECEIVED

2010 JUN 14 AM 8:40

FLORIDA COUNTY
ELECTIONS DEPARTMENT

I, Richard M. Gomez,

candidate for the office of Community Council District 10 Subarea 103;

have received, read and understand the requirements of Chapter 106,

Florida Statutes.

X 

Signature of Candidate

6/10/2010
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).

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



Candidate/Chairperson:

Richard

Mathew

Gomez

First Name

Middle Name

Last Name

Community Council District 10 Subarea 103

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 checked="" type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Received by:

Candidate/Chairperson Signature

Date: 6/9/2010

Phone No.: 305-551-9708

Fax No.: 305-558-9020

E-mail address: rgomez@tgsu.com

RECEIVED
2010 JUN 14 AM 8:10
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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



- ☒ Candidate (office sought): Community Council District 10 Subarea 103
- ☐ Political Committee: _____
- ☐ Party Executive Committee: _____
- ☐ Other: _____

I, Richard M. Gomez
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with the Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.

A handwritten signature in black ink, appearing to be "R. Gomez", written over a horizontal line.

Signature of Candidate or Chairperson

6/10/10

Date

Day Time Telephone No: 305-823-5755

Email Address: rgomez@tgs.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.

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT
2011 JUN 14 AM 8:10
1000 BAYVIEW BLVD
SUITE 1000
MIAMI, FL 33134

**LOYALTY OATH FOR MIAMI-DADE COUNTY
COMMUNITY COUNCIL MEMBER**

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA Miami-Dade County

2010 JUN 14 AM 8:40

I,

Richard

M

Gomez

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, Richard M. Gomez

(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: **Community Council Member Area** 10 **Subarea** 103

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 Unincorporated Miami-Dade County

- ☒ I have been a Miami-Dade County resident elector for at least three years prior to qualifying.
- ☒ I have been a resident elector of the Council Area 10 for at least six (6) months prior to qualifying.
- ☒ I have been a resident elector of the Subarea 103 for at least three (3) 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.

X

305-823-5755

rgomez@tgsv.com

Signature of Candidate

Daytime Telephone Number

Email Address

10040 SW 33 Street

Miami

FL

33165

Address

City

State

Zip Code

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 10 day of June, 20010 by _____.

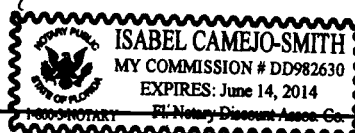
Personally Known: ☒ or

Produced Identification: _____

Type of Identification Produced: _____

Signature of Notary Public - State of Florida

Print, Type or Stamp Commissioned Name of Notary Public



FOR QUALIFYING FEE