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MIAMI DADE ELECTIONS

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

OFFICE USE ONLY

CHECK APPROPRIATE BOX:

Original Appointment of Treasurer

Reappointment of Treasurer

Deputy Treasurer

1. Committee or Organization

MIAMI VOICE PAC

2. Telephone

(786) 547-8034

3. Name of Treasurer or Deputy Treasurer

Heidy M. Medina

4. Email (optional)

5. Telephone (optional)

(786) 234-4620

6. Mailing Address

7722 NW 201 Terrace, Miami, FL 33015

7. Street Address

8. The following bank has been designated as the

Primary Depository

Secondary Depository

9. Name of Bank

US Century Bank

10. Street Address

100 SE 2nd Street #100

11. City

Miami

12. State

FL

13. Zip Code

33131

14. Signature of Chairman

X [Signature]

15. Name of Chairman (Print or Type)

VANESSA BEITO

Campaign Treasurer's Acceptance of Appointment

I, Heidy Medina, do hereby accept the appointment as

treasurer or deputy treasurer for

Miami Voice Pac

(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.

10/20/2010

Date

X

[Signature]

Signature of Campaign Treasurer or Deputy Treasurer

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

**1. Full Name of Committee**

Miami Voice

Telephone

786.547.8084

Mailing Address (include city, state and zip code)

7722 NW 201 Terrace, Miami, FL 33015

Street Address (include city, state and zip code)

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A	N/A	N/A

**3. Area, Scope and Jurisdiction of the Committee**

County budget allocations by Board of County Commissioners, County Mayor, and County government. Miami-Dade County, Florida

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

Accountability; Economic/Budget

**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
Barbara Walters	P.O. Box 144331, Coral Gables, Fl, 33114  RECEIVED MIAMI DADE 2010 OCT - 5 AM 11:49	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
Vanessa Brito	7722 NW 201 Terrace, Miami, FL 33015	Chairman
Miriam M. Planas	8937 SW 12 Street, Miami, FL 33172	Co-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)** N/A

Full Name	Mailing Address	Office Sought	Party

**8. List Any Issues this Committee is Supporting:** N/A

List Any Issues this Committee is Opposing: Property Tax Increases

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

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

Charitable Contribution

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

Name of Bank or Depository & Account Number	Mailing Address

**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** N/A

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

STATE OF Florida COUNTY Miami-Dade

I, Vanessa Brito, certify that the information in this Statement of Organization is complete, true and correct.

X

[Signature]  
Signature of Chairman of Political Committee

10/2/2010  
Date

2010 OCT -5 AM 11:19

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



Candidate/Chairperson:

VANESSA ~~Beito~~ Beito  
 First Name Middle Name Last Name

Chairman - Miami Voice PAC  
 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"/>	RECEIVED 2010 OCT 18 PM 1:23 MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
Miami-Dade County Qualifying Handbook		<input type="checkbox"/>	<input type="checkbox"/>	
Committee Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	

Received by: VANESSA Beito  
 Candidate/Chairperson Signature

Date: 10/12/2010

Phone No.: 786-547-8084 Fax No.: \_\_\_\_\_

E-mail address: Beito@yourmiamivoice.org



**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**  
(Section 106.022, F.S.)

OFFICE USE ONLY

FLORIDA  
ELECTIONS DEPARTMENT

2010 OCT 18 PM 1:23

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- Original Appointment       Change of Appointment  
 Change of Mailing Address       Change of Physical Address

**Registered Agent and Office Information**

Name <u>VANESSA BRITO</u>		Telephone <u>786-547-8084</u>
Street Address <u>7722 NW 201 Terrace</u>		
City <u>MIAMI</u>	State <u>FL</u>	Zip Code <u>33015</u>
Mailing Address		
City	State	Zip Code

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the Division of Elections.

[Signature]      10/12/2010  
Signature of Registered Agent      Date

**Former Registered Agent and Office Information (for changes only)**

Name		Telephone
Street Address		
City	State	Zip Code

**Committee or Organization Information**

Name of Committee or Organization <u>MIAMI VOICE Political Action Committee</u>		
Street Address <u>7722 NW 201 terrace</u>		Telephone <u>786-547-8084</u>
City <u>Miami</u>	State <u>FL</u>	Zip Code <u>33015</u>

Committee or organization is registered with:

- Division of Elections       County MIAMI-DADE       City \_\_\_\_\_

[Signature]      10/12/2010  
Signature of Chairperson      Date  
VANESSA BRITO  
Print Name of Chairperson

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

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2010 OCT -5 AM 11:49

MIAMI DADE  
ELECTIONS

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer       Reappointment of Treasurer       Deputy Treasurer

1. Committee or Organization Miami Voice		2. Telephone (786 ) 287-7027	
3. Name of Treasurer or Deputy Treasurer Barbara Walters		4. Email (optional)	
		5. Telephone (optional) (786 ) 287-7027	
6. Mailing Address P.O. Box 144331, Coral Gables, FL 33114			
7. Street Address			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank US Century Bank		10. Street Address 2301 NW 87th Avenue, Doral, Florida 33172	
11. City Doral		12. State Florida	13. Zip Code 33172
14. Signature of Chairman <input checked="" type="checkbox"/> 		15. Name of Chairman (Print or Type) Vanessa Brito	

**Campaign Treasurer's Acceptance of Appointment**

I, Barbara Walters, do hereby accept the appointment as  
(Please Print or Type)  
treasurer or deputy treasurer for Miami Voice  
(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.

10/5/2010  
Date

  
Signature of Campaign Treasurer or Deputy Treasurer