

**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.

RECEIVED
10 DEC 27 PM 4:56
MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

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

Bruno A. Barreiro

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

P.O. BOX 015644
Miami, FL 33101-5644

4. Telephone

(305) 642-2228

5. E-mail address

vote4bruno@bellsouth.net

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

Miami Dade County Commissioner - District 5

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

Bruno A. Barreiro

11. Mailing Address

P.O. BOX 015644

12. Telephone

(305) 642-2228

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33101

17. E-mail address

vote4bruno@bellsouth.net

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Ocean Bank

20. Address

780 NW 42nd Avenue

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33126

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

12-23-10

26. Signature of Candidate

Bruno Barreiro

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

I, Bruno A. Barreiro, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

12-23-10

Bruno Barreiro

Date

Signature of Campaign Treasurer or Deputy Treasurer

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DEPOSITORY FOR CANDIDATES**

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

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RECEIVED
10 DEC 21 PM 4:50
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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OFFICE USE ONLY

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Bruno A. Barreiro

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

P.O. BOX 015644
Miami, FL 33101-5644

4. Telephone

(305) 642-2228

5. E-mail address

vote4bruno@bellsouth.net

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

Miami Dade County Commissioner - District 5

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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

Zoraida A. Barreiro

11. Mailing Address

P.O. BOX 015644

12. Telephone

(305) 642-2228

13. City

Miami

14. County

Miami-Dade

15. State

FL

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17. E-mail address

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25. Date

12-23-10

26. Signature of Candidate




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

I, Zoraida A. Barreiro, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

12-23-10

Date



Signature of Campaign Treasurer or Deputy Treasurer

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ELECTIONS DEPARTMENT

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Bruno A. Barreiro

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

P.O. BOX 015644
Miami, FL 33101-5644

4. Telephone

(305) 642-2228

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vote4bruno@bellsouth.net

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

Miami Dade County Commissioner - District 5

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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

Loreta M. Sanchez

11. Mailing Address

P.O. BOX 015644

12. Telephone

(305) 642-2228

13. City

Miami

14. County

Miami-Dade

15. State

FL

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vote4bruno@bellsouth.net

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25. Date

12-23-10

26. Signature of Candidate



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

I, Loreta M. Sanchez, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

12-23-10

Date


Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)


(Please Type)

OFFICE USE ONLY

RECEIVED
10 DEC 27 PM 4:55
HAMILTON COUNTY
ELECTORS DEPARTMENT

I, Bruno A. Barreiro,
candidate for the office of County Commissioner - District 5 ;
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X


Signature of Candidate

12-23-10

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:

Bruno A. Barreiro

First Name	Middle Name	Last Name
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County Commissioner - District 5

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: Bruno Barreiro
Candidate/Chairperson Signature

Date: 12-23-10

Phone No.: 305-642-2228

Fax No.: 305-541-9245

E-mail address: vote4bruno@bellsouth.net

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

10 DEC 21 PM 6:55

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



- Candidate (office sought): County Commissioner - District 5
- Political Committee: _____
- Party Executive Committee: _____
- Other: _____

I, Bruno A. Barreiro
(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.

Bruno Barreiro 12-23-10
Signature of Candidate or Chairperson Date

Day Time Telephone No: 305-642-2228

Email Address: vote4bruno@bellsouth.net

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.

RECORDED
10 DEC 21 PM 6:54
ELECTIONS DEPARTMENT