

**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.

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MIAMI-DADE  
ELECTIONS

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)

TONY GARCIA

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

P.O. Box 941361  
MIAMI, FL 33194-1361

4. Telephone

(305) 552-7698

5. E-mail address

TONYGARCIA123@comcast.com

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

COUNTY MARSH

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

RASQUEL M. PADRON

11. Mailing Address

201 178TH DRIVE #507

12. Telephone

305 933-3063

13. City

Sunny Isles Beach

14. County

Dade

15. State

FL

16. Zip Code

33160

17. E-mail address

RPADRON21@gmail.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

BANK UNITED

20. Address

13270 SW 8ST

21. City

MIAMI

22. County

DADE

23. State

FL

24. Zip Code

33184

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

MR 30, 2001

26. Signature of Candidate

X [Signature]

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

I, RASQUEL M. PADRON, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

03/30/2011

Date

X

[Signature]

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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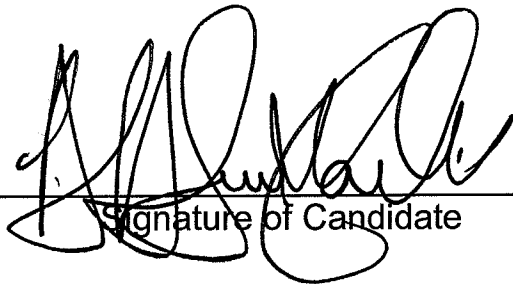
MIAMI-DADE  
ELECTIONS

I, Antonio H. Garcia-Melendez (aka Tony Garcia),  
candidate for the office of County May 2012;

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

Florida Statutes.

X

  
Signature of Candidate

MR 30, 2011  
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  
Electronic Filing Requirements  
for Miami-Dade County



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ELECTIONS

- ☒ Candidate (office sought): County mayor
- ☐ Political Committee: \_\_\_\_\_
- ☐ Party Executive Committee: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

I, Antonio H. Garcia-Molina (aka Tony Garcia)  
(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.

[Signature] MD30, 2011  
Signature of Candidate or Chairperson Date

Day Time Telephone No: 305-552-7698

Email Address: TONY GARCIA 123@201.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.*

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



Candidate/Chairperson:

TONY

GARCIA

First Name

Middle Name

Last Name

COUNTY MAYOR

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"/>	

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MIAMI-DADE  
ELECTIONS

Received by:

Candidate/Chairperson Signature

Date:

APR 01, 2011

Phone No.:

305-552-7698

Fax No.:

E-mail address:

TONYGARCIA123@AOL.COM