

**CANDIDATE QUALIFYING REQUIREMENTS  
 QUALIFYING PERIOD  
 Noon, July 26, 2016 to Noon, August 12, 2016  
 NOVEMBER 8, 2016 ELECTION**

FEB 04 2016  
 Clerks Ofc.

**CANDIDATE:**

Sue "Susi" Loyzelle

02-04-16 P01:23 RCVD

**POSITION:**

Vice Mayor

**PICKED UP PACKAGE:**

**COMPLETED PACKAGE:**

08-08-16 P12:25 RCVD

08-08-16 P12:25 RCVD

**Qualifying Checklist:**

**RECEIVED**  
 AUG 08 2016  
 Clerks Ofc.

X

Provided proof of Voter's Registration (for file)

X

Affidavit of Candidacy and Residency, Notarized AND Driver's License (for file)

02-03-16 & 02-12-16 X

Appointment of Campaign Treasurer and Designation of Campaign Depository Form DS-DE 9

02-03-16 X

Statement of Candidate DS-DE 84

X - waived (see att'd)

Statement of Fair Campaign Practices

X

Loyalty Oath / Oath of Candidate DS-DE 25

X

Form 1 Statement of Financial Interests

X

Qualifying Fee of \$100.00 (Paid by Campaign Acct. Check No. 1009)

X

State Election Assessment (Paid by Campaign Acct. Check No. 1010)  
 One percent of annual salary (\$76.17 for Vice Mayor and Council Members – annual salary is \$7,617.36)



RECEIVED  
FEB 04 2016  
Clerks Ofc.

**CANDIDATE CAMPAIGN INFORMATION RECEIPT  
QUALIFYING PERIOD  
Noon, July 26, 2016 to Noon, August 12, 2016**

**NOVEMBER 8, 2016 GENERAL ELECTION**

I, SUE "Susi" Loyzelle, HEREBY ACKNOWLEDGE RECEIPT OF A  
CANDIDATE QUALIFYING INFORMATION PACKAGE ON THIS 4 DAY OF February 2016.

**The following items shall be filed with the Town Clerk prior to the end of the qualifying period (August 12, 2016 at Noon) in order to qualify to be placed on the ballot for the November 8, 2016 General Election:**

- X Provided proof of Voter's Registration (for file)
- X Affidavit of Candidacy and Residency, Notarized & Driver's License (for file)
- 02-03-16  
02-12-16 X Appointment of Campaign Treasurer and Designation of Campaign Depository Form DS-DE 9
- 02-03-16 - X Statement of Candidate DS-DE 84
- X - waived (see attached) Voluntary Statement of Fair Campaign Practices
- X Oath of Candidate DS-DE 25
- X Form 1 Statement of Financial Interests
- X Qualifying Fee of \$100.00 (Paid by Campaign Acct. Check No. 10091)
- X State Election Assessment (Paid by Campaign Acct. Check No. 1010)  
One percent of annual salary (\$76.17 for Vice Mayor and Council Members - annual salary is \$7,617.36)

RECEIVED  
AUG 08 2016  
Clerks Ofc. (j)

**Further important information provided to the candidate:**

- Town of Cutler Bay Ordinance 15-06 – Establishing Qualifying Period for 2016 Election
- Town of Cutler Bay Ordinance 06-11 – Campaign Contributions by a Vendor
- Town of Cutler Bay Town Charter
- Town of Cutler Bay Council District Map
- Town of Cutler Bay Election Sign Regulations
- 2016 Calendar of Reporting Dates
- Candidate and Treasurer's Handbook
- Compilation of Election Laws 2015
- Miami Dade County Poll Watcher Information
- Town of Cutler Bay Precinct List
- Sunshine Guide and Code of Ethics Publication
- Financial Forms: (Summary, Expenditures, Contributions, Waiver)

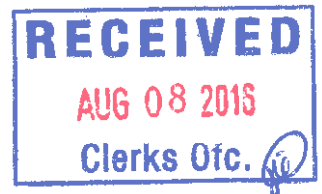
Sue Loyzelle  
Signature

02/04/16  
Date

Pursuant to F.S. 99.061(7)(c), the Town Clerk, as filing officer, performs a ministerial function in reviewing qualifying papers. In determining whether a candidate is qualified, the filing officer shall review the qualifying paper to determine whether all items required have been properly filed and whether each item is complete on its face. The filing officer may not determine whether the contents of the qualifying papers are accurate. Please be advised that the information contained herein is intended as a reference guide only. The Town Clerk's Office will provide assistance to candidates; however, it is not the responsibility of this Office to interpret Florida Statutes.



DECLARATION AND FIRST AMENDMENT WAIVER  
FOR CANDIDATES WHO AGREE TO COMPLY WITH  
THE *VOLUNTARY* STATEMENT OF FAIR CAMPAIGN PRACTICES



AN EXPLANATION REGARDING YOUR RIGHTS 08-08-16P12:29 RC

Section 2-11.1.1(D)(2) of the Code of Miami-Dade County, Florida, provides that any candidate for public office in Miami-Dade County may at any time *voluntarily* declare that he or she agrees to abide by the *voluntary* Statement of Fair Campaign Practices. In agreeing to abide by the *voluntary* Statement of Fair Campaign Practices, the candidate recognizes, as compulsory, the authority of the Miami-Dade County Commission on Ethics and Public Trust to decide whether the candidate has violated the *voluntary* Statement of Fair Campaign Practices and, if so, to impose the appropriate penalty, if any.

Before agreeing to abide by the *voluntary* Statement of Fair Campaign Practices, you should carefully read the *voluntary* Statement of Fair Campaign Practices included with this DECLARATION AND FIRST AMENDMENT WAIVER as well as the following information regarding your rights.

The Statement of Fair Campaign Practices is *voluntary*. You are under no obligation to agree to the *voluntary* Statement of Fair Campaign Practices. If you decide not to agree to the *voluntary* Statement of Fair Campaign Practices, you may still run for elective office in Miami-Dade County if you are qualified. There is NO PENALTY if you decide not to sign the *voluntary* Statement of Fair Campaign Practices.

If you decide to agree to the *voluntary* Statement of Fair Campaign Practices, you should know that you will be WAIVING YOUR FIRST AMENDMENT RIGHTS TO FREE SPEECH because certain speech prohibited by the *voluntary* Statement of Campaign Practices is protected by the First Amendment to the U.S. Constitution and Article I, Section 4, of the Florida Constitution. Prior to agreeing to comply with the *voluntary* Statement of Fair Campaign Practices, you should consider consulting an attorney to ensure that you understand the consequences of signing the DECLARATION AND FIRST AMENDMENT WAIVER.

Before signing this DECLARATION AND FIRST AMENDMENT WAIVER, you have the right to request and receive from the Ethics Commission an advisory opinion as to whether your planned campaign activities (e.g., campaign advertisement or statements) are likely to violate the *voluntary* Statement of Fair Campaign Practices. In the event that you sign the DECLARATION AND FIRST AMENDMENT WAIVER, you will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that you may be considering.

A determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER shall not be construed by Miami-Dade County or the Ethics Commission to mean that the candidate is unethical in any way. Further, a determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER should not be construed by any candidate or any other person or entity to mean that the candidate is unethical in any way.

INSTRUCTIONS

The DECLARATION AND FIRST AMENDMENT WAIVER, which includes the *voluntary* Statement of Fair Campaign Practices, can be found on page 2 of this form. If you are a candidate for county office and agree to abide by the *voluntary* Statement of Fair Campaign Practices, please sign the DECLARATION AND FIRST AMENDMENT WAIVER and file with the Miami-Dade Commission on Ethics and the Miami-Dade Elections Department. If you are a candidate for municipal office and agree to abide by the *voluntary* Statement of Fair Campaign Practices, please sign and file with the Miami-Dade Commission on Ethics and your respective municipal clerk. For further information, contact the Miami-Dade Office of Governmental Affairs at 305 499-8410.

**Miami-Dade Commission on Ethics**  
19 W. Flagler St., Suite 820  
Miami, FL 33130

**Miami-Dade Elections Department**  
2700 NW 87<sup>th</sup> Ave. or P.O. Box 521550  
Doral, FL 33172 Miami, FL 33152-1550





DECLARATION FOR CANDIDATES NOT AUTOMATICALLY COVERED  
by the **Mandatory Provisions** of the  
Miami-Dade Ethical Campaign Practices Ordinance  
Miami-Dade County Code at 2-11.1.1(C) (1)

The Mandatory Fair Campaign Practices Ordinance at Sec. 2-11.1.1(C) of the Miami-Dade County Code extends to—

- Candidates, and their respective campaign staffs, for Miami-Dade Co. Commissioners or Mayor;
- Candidates, and their respective campaign staffs, for Miami-Dade Co. Community Councils;
- Candidates, and their respective campaign staffs, for any municipal elective office within Miami-Dade County;
- Candidates, and their respective campaign staffs, for the Co. Property Appraiser.

Other candidates for elective office with a constituency in whole or in part in Miami-Dade Co. who are *not* required to comply with the Mandatory Fair Campaign Practices Ordinance *may* at any time declare that they agree to abide by the Mandatory Fair Campaign Practices Ordinance.

The Mandatory Fair Campaign Practices Ordinance states that a candidate shall not—

- With actual malice make or cause to be made any untrue oral statement about another candidate or a member of his or her family or staff that exposes the person to hatred, contempt, or ridicule or causes the person to be shunned or avoided or injured in his or her business or occupation;
- With actual malice publish, or cause to be published, by writing, printing, picture, effigy, sign, or otherwise than by mere speech any untrue statement about another candidate or a member of his or her family or staff that exposes the person to hatred, contempt, or ridicule or causes the person to be shunned or avoided or injured in his or her business or occupation;
- Willfully injure, deface, or damage or cause to be injured, defaced, or damaged, by any means, any campaign poster, sign, leaflet, handbill, literature, or other campaign material of another candidate;
- Knowingly obtain, or cause to be obtained, the campaign property of another candidate with the intent to temporarily or permanently deprive the candidate of a right to the property or its benefit; *or*
- Knowingly file with the Ethics Commission a groundless or frivolous complaint against another candidate.

If you are not automatically covered by the Mandatory Fair Campaign Practices Ordinance, but you have a constituency in whole or in part in Miami-Dade County and you would like to abide by the Mandatory Fair Campaign Practices Ordinance, please sign and date below. Once signed, the Declaration is deemed irrevocable for the duration of the campaign.

I, SUE "Susi" Loyzelle, a candidate for the office of  
please print your name

Vice Mayor in Town of Cutler Bay  
elective office sought county, municipality, or other jurisdiction

understand that I am not automatically bound by the Mandatory Fair Campaign Practices Ordinance of Miami-Dade Co. Nevertheless, I choose to abide by the Mandatory Fair Campaign Practices Ordinance and recognize the compulsory jurisdiction of the Ethics Commission and its authority to decide whether I have violated the ordinance at Sec. 2-11.1.1(C) of the County Code. I further understand that if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any.

\*   
**Signature**

8/8/14  
**Date**

CANDIDATE OATH –  
NONPARTISAN OFFICE

(Not for use by Judicial or  
School Board Candidates)



08-08-16P12:35 RCVD

OFFICE USE ONLY

OATH OF CANDIDATE  
(Section 99.021, Florida Statutes)

I, SUE "Susi" Loyzelle  
(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 nonpartisan office of Vice Mayor  
(office) (district #)

(circuit #) (group or seat #); I am a qualified elector of Miami-Dade County, Florida;

I am qualified under the Constitution and the Laws of Florida 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; and I will support the Constitution of the United States and the Constitution of the State of Florida.

X [Signature] (786)-817-4852 vote@susiloyzelle.com  
Signature of Candidate Telephone Number Email Address

9295 SW 185 Terrace Cutter Bay, FL. 33157  
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 109475410

\* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

Soo See Loy zell

STATE OF FLORIDA

COUNTY OF Miami-Dade

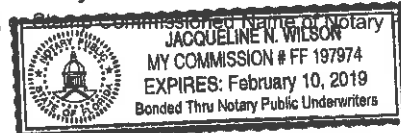
Sworn to (or affirmed) and subscribed before me this 8th day of August, 2016.

Personally Known: X or

Produced Identification: X

Type of Identification Produced: Drivers License

Jacqueline N. Wilson  
Signature of Notary Public  
Print, Type, and State Commissioned Name of Notary Public



**INSTRUCTIONS: INSERTING PHONETIC SPELLING OF CANDIDATE'S NAME FOR AUDIO BALLOT**

Use the PRONUNCIATION KEY below to provide pronunciations for ambiguous first names and surnames. Capitalize STRESSED syllables, use lower case for unstressed syllables. Use dashes (-) to separate syllables. You should also add any notes such as rhyming examples, silent letters, etc.

**Samples:**

PRONUNCIATION KEY Stressed Vowel Sounds	
EE	(FEET) feet
I	(FIT) fit
E	(BED) bed
A	(KAT) cat (KAD) cad
AH	(FAH-thur) father (PAHR) par
AH	(HAHT) hot (TAH-dee) toddy
UH	(FUHJ) fudge (FLUHD) flood
UH	(CHUHRCH) church
AW	(FAWN) fawn
U	(FUL) full
OO	(FOOD) food
OU	(FOUND) found
O	(FO) foe
EI	(FEIT) fight
AI	(FAIT) fate
OI	(FOIL) foil
YOO	(FYOOR-ee-uhs) furious

NAME ON BALLOT	PRONOUNCED AS
Mishaud	mee-SHO ('d' is silent)
Jahn	HAHN (rhyme: fawn)
Beauprez	boo-PRAI (rhyme: hooray)
Maniscalco	man-uh-SKAL-ko
Tangipahoa	TAN-ji-pah-HO-uh
Monte	Mahn-TAI
Tanya	TAWN-yuh (not TAN)

Unstressed Vowel Sounds	
uh	(SO-fuh) sofa (FING-guhr) finger

Certain Vowel Sounds with R	
AHR	(PAHR) par
ER	(PER) pair
IR	(PIR) peer
OR	(POR) pour
OOR	(POOR) poor
UHR	(PUHR) purr

Consonant Sounds			
B	(BED) bed	TS	(ITS) its (PITS-feeld) Pittsfield
D	(DET) debt	TH	(THEI) Thigh
F	(FED) fed	TH	(THEI) Thy
G	(GET) get	ZH	(A-zhuhr) azure (VI-zhuhn) vision
H	(HED) head	Z	(GOODZ) goods (HUH-buhz-tuhn) Hubbardston
HW	(HWICH) which		
J	(JUHG) jug		
K	(KAD) cad		
L	(LAIM) lame		
M	(MAT) mat		
N	(NET) net		
NG	(SING-uhr) singer		
P	(PET) pet		
R	(RED) red		
S	(SET) set		
T	(TEN) ten		
V	(VET) vet		
Y	(YET) yet		
W	(WICH) witch		
CH	(CHUCRCH) church		
SH	(SHEEP) sheep		

NOTE: This page should not be submitted to the filing officer.



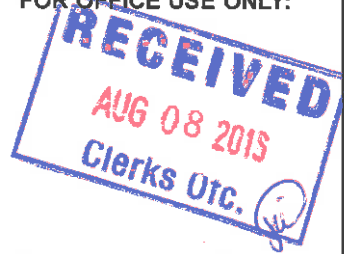
**FORM 1**

**STATEMENT OF FINANCIAL INTERESTS**

**2015**

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:



LAST NAME -- FIRST NAME -- MIDDLE NAME :  
 Loyzelle Sve "Susi" Ellen

MAILING ADDRESS :  
 9275 SW 185 Terrace

CITY : ZIP : COUNTY :  
 Cutler Bay FL 33157 Miami Dade

NAME OF AGENCY :  
 Town of Cutler Bay

NAME OF OFFICE OR POSITION HELD OR SOUGHT :  
 Vice Mayor

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

08-8-16P12:31 RCVD

**\*\*\*\* BOTH PARTS OF THIS SECTION MUST BE COMPLETED \*\*\*\***

**DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2015 OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

**MANNER OF CALCULATING REPORTABLE INTERESTS:**

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR  DOLLAR VALUE THRESHOLDS

**PART A -- PRIMARY SOURCES OF INCOME** [Major sources of income to the reporting person - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Ymca of South Florida	900 SE 3 <sup>rd</sup> Ave # 300 Ft. Lauderdale FL 3316	NOT for Profit April 1 - Dec 31 2015
Ymca of Greater Miami	730 NW 107 Ave # 200 Miami 33172	NOT for Profit Jan 1 - March 31 2015
Town of Cutler Bay	10720 Caribbean Blvd, Cutler Bay FL 33189	Municipality

**PART B -- SECONDARY SOURCES OF INCOME**

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None			

**PART C -- REAL PROPERTY** [Land, buildings owned by the reporting person - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

None

**FILING INSTRUCTIONS** for when and where to file this form are located at the bottom of page 2.

**INSTRUCTIONS** on who must file this form and how to fill it out begin on page 3.

**PART D — INTANGIBLE PERSONAL PROPERTY** [Stocks, bonds, certificates of deposit, etc. - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Stocks	RBC Capital Markets, LLC

**PART E — LIABILITIES** [Major debts - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
USAA	10750 McDermott Freeway San Antonio, TX

**PART F — INTERESTS IN SPECIFIED BUSINESSES** [Ownership or positions in certain types of businesses - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	ADDRESS OF BUSINESS ENTITY	NONE
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

**PART G — TRAINING**

For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

**SIGNATURE OF FILER:**

Signature:



Date Signed:

8-8-16

**CPA or ATTORNEY SIGNATURE ONLY**

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, \_\_\_\_\_, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**FILING INSTRUCTIONS:**

**WHAT TO FILE:**

After completing all parts of this form, **including signing and dating it**, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

**NOTE:**

**MULTIPLE FILING UNNECESSARY:**

A candidate who previously filed Form 1 because of another public position must file a copy of his or her Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

**Facsimiles will not be accepted.**

**WHERE TO FILE:**

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

**Local officers/employees** file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

**State officers or specified state employees** file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see page 3 of instructions.

**WHEN TO FILE:**

**Initially**, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

**Candidates** must file at the same time they file their qualifying papers.

**Thereafter**, file by July 1 following each calendar year in which they hold their positions.

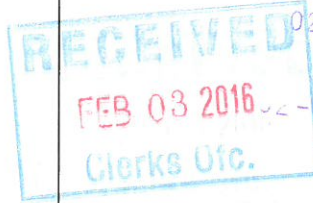
**Finally**, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does **not** relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2015.

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type).

OFFICE USE ONLY



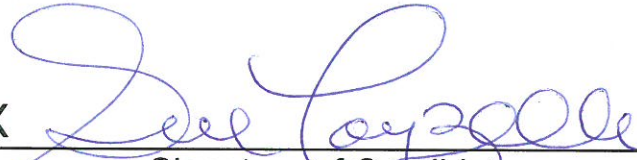
02-03-16 P04:59 IN

02-03-16 P04:59 IN

I, SOE Loyzelle,

candidate for the office of Vice Mayor;

have been provided access to read and understand the requirements of  
Chapter 106, Florida Statutes.

X   
Signature of Candidate

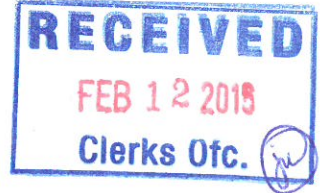
2/3/16  
Date

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).

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

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

(PLEASE PRINT OR TYPE)



02-12-16P04:51 RCVD

**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

**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)**

Sue "Susi" Loyzelle

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

9275 SW 185th Terrace  
Cutler Bay, FL 33157

**4. Telephone**

(305 ) 338-6318

**5. E-mail address**

sueloyzelle@gmail.com

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

Vice Mayor

**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**

Marden Munoz

**11. Mailing Address**

8244 SW 176th Terrace

**12. Telephone**

( 305 ) 586-2888

**13. City**

Palmetto Bay

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33157

**17. E-mail address**

mardenf@hotmail.com

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

**19. Name of Bank**

TD Bank

**20. Address**

19199 S Dixie Highway

**21. City**

Cutler Bay

**22. County**

Miami-Dade

**23. State**

Florida

**24. Zip Code**

33157

**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**

2/12/16

**26. Signature of Candidate**

*Sue Loyzelle*

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

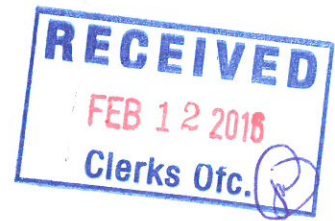
I, Marden F. Munoz, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

2/12/16

Date

*Marden F. Munoz*  
Signature of Campaign Treasurer or Deputy Treasurer



02-12-16P04:51 RCVD

### 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.

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)

Sue "Susi" Loyzelle

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

9275 SW 185th Terrace  
Cutler Bay, FL 33157

4. Telephone

(305 ) 338-6318

5. E-mail address

sueloyzelle@gmail.com

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

Vice Mayor

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

Sue Loyzelle

11. Mailing Address

9275 SW 185th Terrace

12. Telephone

( 305 ) 338-6318

13. City

Cutler Bay

14. County

Miami-Dade

15. State

FL

16. Zip Code

33157

17. E-mail address

sueloyzelle@gmail.com

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

19. Name of Bank

TD Bank

20. Address

19199 S Dixie Highway

21. City

Cutler Bay

22. County

Miami-Dade

23. State

Florida

24. Zip Code

33157

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

2/12/16

26. Signature of Candidate

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

I, Sue Loyzelle, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

2/12/16

Date

Signature of Campaign Treasurer or Deputy Treasurer