

**MIAMI-DADE COUNTY ELECTIONS DEPARTMENT  
REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR  
POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS,  
501(c)(4) ORGANIZATIONS AND POLITICAL PARTIES**

**Name**  
Zoraida A Barreiro

---

**Address (number and street)**  
2101 SW 4 Avenue

---

**City, State, Zip Code**  
Miami, FL, 33129

---

CHECK IF ADDRESS HAS CHANGED

**OFFICE USE ONLY**

RECEIVED  
2017 MAR 15 PM 1:02  
OFFICE OF THE CITY CLERK  
CITY OF MIAMI

**Filing as:**

Elected Official  
Office: \_\_\_\_\_

Miami-Dade County Candidate  
Office: \_\_\_\_\_

Municipal Candidate City of Miami  
*(Name of Municipality)*

Office: City Commission, District 3

**CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

I certify that I have examined this report and it is true, correct, and complete.

Anibal Duarte-Viera  
(Type name)  Treasurer  Deputy Treasurer

**X** \_\_\_\_\_  
Signature

\_\_\_\_\_ 3/1/17  
Date

I certify that I have examined this report and it is true, correct, and complete.

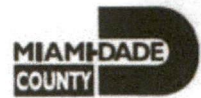
Zoraida A Barreiro  
(Type name)  Elected Official  Candidate

**X** \_\_\_\_\_  
Signature

\_\_\_\_\_ 3/1/17  
Date



- Amendment



MIAMI-DADE COUNTY ELECTIONS DEPARTMENT  
REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR  
POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS,  
501(c)(4) ORGANIZATIONS AND POLITICAL PARTIES

Name  
Zoraida A Barreiro

Address (number and street)  
2101 SW 4 Avenue

City, State, Zip Code  
Miami, FL 33129

CHECK IF ADDRESS HAS CHANGED

OFFICE USE ONLY

RECEIVED  
2017 JUL 10 PM 3:47  
OFFICE OF THE CITY CLERK  
CITY OF MIAMI

Filing as:

Elected Official

Office: \_\_\_\_\_

Miami-Dade County Candidate

Office: \_\_\_\_\_

Municipal Candidate City of Miami

Office: Commissioner, District 3 (Name of Municipality)

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete. (SECTION APPLICABLE TO CANDIDATES ONLY)  
Anibal Duarte-Viera

(Type name)  Treasurer  Deputy Treasurer

**X** \_\_\_\_\_  
Signature

03-01-2017  
Date

I certify that I have examined this report and it is true, correct, and complete. (FOR BOTH ELECTED OFFICIALS AND CANDIDATES)  
Zoraida A Barreiro

(Type name)  Elected Official  Candidate

**X** \_\_\_\_\_  
Signature

03-01-2017  
Date

