

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

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

(PLEASE PRINT OR TYPE)

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MIAMI-DADE  
ELECTIONS

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)

Antwane Dwayne Lenoir

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

13301 NW 24th Avenue  
Westview, FL 33167.

**4. Telephone**

(786) 486.1770

**5. E-mail address**

adLsdL46@gmail.com

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

County Commissioner District 2

**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**

Shebreeceay D. Lenoir

**11. Mailing Address**

13301 NW 24th Avenue

**12. Telephone**

(786) 346.8066.

**13. City**

Westview

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33167

**17. E-mail address**

LadysL4@gmail.com

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

**19. Name of Bank**

Wells Fargo Bank, N.A.

**20. Address**

13100 NW 27th Avenue

**21. City**

Westview

**22. County**

Miami-Dade

**23. State**

FL

**24. Zip Code**

33167.

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**

05/20/14

**26. Signature of Candidate**

X Antwane D. Lenoir

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

I, Shebreeceay D. Lenoir, do hereby accept the appointment  
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer    ☐ Deputy Treasurer.

05/20/14  
Date

X Shebreeceay D. Lenoir  
Signature of Campaign Treasurer or Deputy Treasurer