

**STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

OFFICE USE ONLY

MIAMI-DADE
ELECTIONS

2005 APR 25 PM 2:04

RECEIVED

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate
*Caryn Canner Schwartz
Group 32*

1. Address (include post office box or street, city, state, zip code)
*North Dade Justice Center
15555 Biscayne Blvd. Room 210
North Miami Beach, FL 33160*

Telephone (optional)
305 354 8761

2. Party (Partisan candidates only)
N/A

3. Office (add district, circuit or group number)
*Miami-Dade County Court Judge
Group 32*

I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer
Caryn Canner Schwartz

5. Mailing Address (If post office box or drawer add street address)
North Dade Justice Center, 15555 Biscayne Blvd (Rm 210)

6. Telephone
305 354 8761

7. City
North Miami Beach

8. County
Miami-Dade

9. State
Florida

10. Zip Code
33160

I have designated the following named bank as my Primary Depository Secondary Depository

11. Name of Bank
Mellon United National Bank

12. Street Address
44 West Flagler Street 1st floor

13. City
Miami

14. County
Miami-Dade

15. State
Florida

16. Zip Code
33130

17. Signature of Candidate
X Caryn Canner Schwartz

Date
April 25, 2005

Campaign Treasurer's Acceptance of Appointment

I, *Caryn Canner Schwartz*, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of *Caryn Canner Schwartz*

who is seeking nomination or election as a *N/A* candidate to the office of
(Party)

Miami-Dade County Court Judge Group 32 As a duly registered voter in *Miami-Dade*
County, Florida, I am qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

April 25, 2005
Date

X Caryn Canner Schwartz
Signature of Campaign Treasurer or Deputy Treasurer

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE TYPE)		OFFICE USE ONLY	
CHECK APPROPRIATE BOX: <input type="checkbox"/> Original Appointment <input checked="" type="checkbox"/> Deputy Treasurer <input type="checkbox"/> Reappointment of Treasurer <input type="checkbox"/> Secondary Depository			
Name of Candidate CARYN CANNER SCHWARTZ		1. Address (include post office box or street, city, state, zip code) <i>15555 Biscayne Boulevard #210 North Miami Beach, FL 33160</i>	
Telephone (optional) 305 354 8761	2. Party (Partisan candidates only)	3. Office (add district, circuit or group number) Miami-Dade Co., 11th Jud Cir, Grp 32	
I have appointed the following person to act as my <input type="checkbox"/> Campaign Treasurer <input checked="" type="checkbox"/> Deputy Treasurer			
4. Name of Treasurer or Deputy Treasurer SCOT IAN SCHWARTZ			
5. Mailing Address (If post office box or drawer add street address) 21320 N.E. 23 COURT			6. Telephone 305 610 5543
7. City MIAMI	8. County MIAMI-DADE	9. State FLORIDA	10. Zip Code 33180
I have designated the following named bank as my <input type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
11. Name of Bank <i>Mellon United National Bank</i>		12. Street Address <i>44 West Flagler St 1st Floor</i>	
13. City <i>Miami</i>	14. County <i>Miami-Dade</i>	15. State <i>Florida</i>	16. Zip Code <i>33130</i>
17. Signature of Candidate <i>X Caryn Canner Schwartz</i>			Date <i>May 4, 2006</i>
Campaign Treasurer's Acceptance of Appointment			
I, SCOT IAN SCHWARTZ , do hereby accept the appointment as (Please Print or Type)			
<input type="checkbox"/> Campaign Treasurer <input checked="" type="checkbox"/> Deputy Treasurer for the campaign of CARYN CANNER SCHWARTZ ^{Group 32}			
who is seeking nomination or election as a _____ candidate to the office of (Party)			
MIAMI-DADE COUNTY CT JUDGE . As a duly registered voter in MIAMI-DADE COUNTY			
County, Florida, I am qualified to accept this appointment.			
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.			
<i>May 4, 2006</i> Date		<i>X [Signature]</i> Signature of Campaign Treasurer or Deputy Treasurer	

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

(Section 105.031(5), F.S.)

(Please Type)

OFFICE USE ONLY

JUDICIAL
ELECTIONS
DIVISION

2005 APR 25 PM 2:04

RECEIVED

I, Caryn Canner Schwartz

a judicial candidate, have received, read, and understand the requirements of the Florida Code of Judicial Conduct.

Caryn Canner Schwartz

(Signature of candidate)

April 25, 2005

(Date)

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.

MIAMI-DADE
ELECTIONS

2005 APR 25 PM 2:04

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OFFICE USE ONLY

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

I, Caryn Canner Schwartz,
candidate for the office of Miami-Dade County Court Judge Group 32
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X Caryn Canner Schwartz April 25, 2005
Signature of Candidate 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).



Miami-Dade Supervisor of Elections
2700 NW 87th Avenue
Miami, FL 33172 (305) 499-8400

RECEIPT

Candidate:

CARYN CANNER SCHWARTZ
First Name Middle Name Last Name

Office: County Court Judge Group # 32

This is to acknowledge my receipt of the following documents:

- Qualifying Handbook for Candidates for Miami-Dade County Court Judge**

Received by: Caryn Canner Schwartz
Candidate Signature

Date: May 4, 2006

JUDICIAL OFFICES LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

OFFICE USE ONLY

STATE OF FLORIDA

MIAMI-DADE COUNTY

(PLEASE PRINT)

I, CARYN

First Name

CANNER

Middle Name/Initial

SCHWARTZ

Last Name

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, CARYN CANNER SCHWARTZ

(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 judicial office of Miami-Dade County Court, , 11th,
(office) (district) (circuit)

32 My legal residence is MIAMI-DADE County, Florida. I am a qualified elector
(group)

of the state and of the territorial jurisdiction of the court to which I seek election. I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be elected or in which I desire to be retained. 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 which I am required to resign pursuant to Section 99.012, Florida Statutes.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.

SIGN HERE

Caryn Canner Schwartz
Signature of Candidate

15555 Biscayne Blvd. #210

Mailing Address

305 354 8761

Day Phone

305 944 5021

Fax Number

North Miami Beach,

City

Florida

State

33160

Zip Code

May 3, 2006

Date Signed



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 3594099

RECEIVED FROM Caryn Canner Schwartz
ADDRESS 21320 NE 23 CT
North Miami Beach FL 33180
CITY STATE ZIP

DATE 5 8 06
MONTH DAY YEAR

CASH \$ _____
CHECKS \$ 4,853.00

AMOUNT OF: _____ DOLLARS, AND _____ CENTS TOTAL \$ 4,853.00

FOR PAYMENT OF: Qualifying Fee - County Court Group 32

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.

DEPT.: Elections BY: MARIA ACOSTA

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 5/98

CAMPAIGN ACCOUNT OF
CARYN SCHWARTZ
21320 NE 23 CT.
NORTH MIAMI BEACH, FL 33180

63-9643
670
0031147127

1032

DATE 5/8/06

PAY TO THE ORDER OF: Board of County Commissioners \$ 4,853.00
Four thousand Eight Hundred Fifty Three DOLLARS

Mellon United National Bank
Miami, Florida

MEMO: Filing fee for qualifying Caryn Schwartz

067009646 0031147127 1032