

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE TYPE)				RECEIVED OFFICE USE ONLY 2005 OCT -4 AM 10:47 MIAMI-DADE ELECTIONS	
CHECK APPROPRIATE BOX:					
<input checked="" type="checkbox"/> Original Appointment		<input type="checkbox"/> Deputy Treasurer		<input type="checkbox"/> Reappointment of Treasurer	
<input type="checkbox"/> Secondary Depository		Name of Candidate			
Deborah White-Labora		1. Address (include post office box or street, city, state, zip code)			
175 NW 1st Ave. Suite 2322, Miami, FL 33128		Telephone (optional)			
305-349-5750		2. Party (Partisan candidates only)		3. Office (add district, circuit or group number)	
				County Court, Group 18	
I have appointed the following person to act as my <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer					
4. Name of Treasurer or Deputy Treasurer					
Alexander J. Labora					
5. Mailing Address (If post office box or drawer add street address)				6. Telephone	
1645 NW 8th Street				305-644-1422	
7. City		8. County		9. State	
Miami		Miami-Dade		Florida	
10. Zip Code		33125			
I have designated the following named bank as my <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository					
11. Name of Bank			12. Street Address		
Mellon United National Bank			9100 Dadeland Blvd.		
13. City		14. County		15. State	
Miami		Miami-Dade		Florida	
16. Zip Code		33156			
17. Signature of Candidate				Date	
X <i>Deborah White-Labora</i>				10/4/05	
Campaign Treasurer's Acceptance of Appointment					
I, <u>Alexander J. Labora</u> , do hereby accept the appointment as					
(Please Print or Type)					
<input checked="" type="checkbox"/> Campaign Treasurer		<input type="checkbox"/> Deputy Treasurer		for the campaign of <u>Deborah White-Labora</u>	
who is seeking nomination or election as a _____ candidate to the office of					
(Party)					
<u>County Court, Group 18</u> As a duly registered voter in <u>Miami-Dade</u>					
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.					
<u>10/4/05</u>		X <i>[Signature]</i>			
Date		Signature of Campaign Treasurer or Deputy Treasurer			

Received 5/8/06
MCA

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
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CHECK APPROPRIATE BOX:

Original Appointment
 Deputy Treasurer
 Reappointment of Treasurer
 Secondary Depository

Name of Candidate <i>Deborah White-Laborer</i>	1. Address (include post office box or street, city, state, zip code) <i>175 NW 1st Ave Suite 2322 Mia, FL 33128</i>
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Telephone (optional) <i>305 349 5750</i>	2. Party (Partisan candidates only)	3. Office (add district, circuit or group number) <i>County Court, Group 18</i>
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I have appointed the following person to act as my
 Campaign Treasurer
 Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer
Deborah White-Laborer

5. Mailing Address (If post office box or drawer add street address) <i>1645 NW 8th St</i>	6. Telephone <i>305 644 1422</i>
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7. City <i>Miami</i>	8. County <i>Miami-Dade</i>	9. State <i>FL</i>	10. Zip Code <i>33125</i>
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I have designated the following named bank as my
 Primary Depository
 Secondary Depository

11. Name of Bank <i>Mellon United National</i>	12. Street Address <i>9100 Dadeland Blvd</i>
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13. City <i>Miami</i>	14. County <i>Miami-Dade</i>	15. State <i>Florida</i>	16. Zip Code <i>33156</i>
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17. Signature of Candidate <i>X Deborah White-Laborer</i>	Date <i>5/8/06</i>
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Campaign Treasurer's Acceptance of Appointment

I, *Deborah White-Laborer*, do hereby accept the appointment as
 (Please Print or Type)

Campaign Treasurer
 Deputy Treasurer
 for the campaign of *Deborah White-Laborer*

who is seeking nomination or election as a _____ candidate to the office of
 (Party)

County Court, Group 18 . 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.

5/8/06
 Date

X [Signature]
 Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

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

(Please Type)

OFFICE USE ONLY

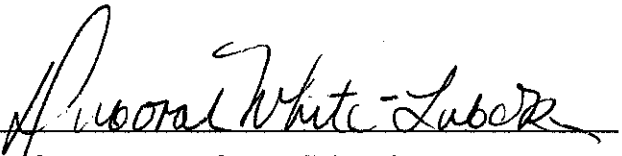
MIAMI-DADE
ELECTIONS

2005 OCT -4 AM 10:47

RECEIVED

I, Deborah White-Labora

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


(Signature of candidate)

(Date) 10/4/05

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.

RECEIVED

2005 OCT 4 AM 10:47
OFFICE USE ONLY

MIAMI-DADE
ELECTIONS

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

I, Deborah White-Labora,

candidate for the office of County Court Judge, Group 18;

have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X

Deborah White-Labora
Signature of Candidate

10/4/05
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:

Deborah White - Labok
 First Name Middle Name Last Name

Office: County Court Judge Group # 18

This is to acknowledge my receipt of the following documents:

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

Received by: Deborah White-Labok
 Candidate Signature

Date: 10/4/05

RECEIVED
 2005 OCT -4 AM 10:47
 MIAMI-DADE
 ELECTIONS

RECEIVED

**JUDICIAL OFFICES
LOYALTY OATH**

(Sections 876.05-876.10, Florida Statutes)

2006 JUNE ONLY
OFFICE 8 11 1:49

MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

STATE OF FLORIDA

DADE

COUNTY

(PLEASE PRINT)

DEBORAH

WHITE-LABORA

First Name

Middle Name/Initial

Last Name

I, 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)

DEBORAH WHITE-LABORA

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

I am a candidate for the judicial office of COUNTY COURT , Miami-Dade , 11th Judicial, (office) (district) (circuit)

18 . My legal residence is 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



Deborah White-Labora
Signature of Candidate

175 N.W. 1ST AVENUE, SUITE 2322

(305) 349-5750 (305) 416-0810

Mailing Address

Day Phone

Fax Number

MIAMI, FLORIDA

33128

5/3/06
Date Signed

City

State

Zip Code



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 3594100

RECEIVED FROM Deborah White-Labora

DATE 5 / 8 / 06
MONTH DAY YEAR

ADDRESS 1645 NW 8th St.

CASH \$ _____

Miami CITY FL STATE 33125 ZIP

CHECKS \$ 4,853.00

AMOUNT OF: Four thousand eight hundred fifty three DOLLARS, AND 00 CENTS

TOTAL \$ 4,853.00

FOR PAYMENT OF: Qualifying Fee - County Court Judge #18

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

DEPT.: Elections

By: Nena G. Saiter

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 5/98

JUDGE DEBORAH WHITE-LABORA
CAMPAIGN ACCOUNT
1645 NW 8TH ST.
MIAMI, FL 33125

63-8648 105
670
0082538174

DATE 5/8/06

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

Meillon United National Bank
Miami, Florida

MEMO Comp 18 Qualifying Fee

⑆067004646⑆ 0082538174 0105