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MIAMI-DADE ELECTIONS

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

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate
Joel S. Jacobi

1. Address (include post office box or street, city, state, zip code)
12555 Biscayne Blvd. # 844
Miami, Florida 33181

Telephone (optional)
(305) 893-4135

2. Party (Partisan candidates only)

3. Office (add district, circuit or group number)
County Court Judge group 09

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

4. Name of Treasurer or Deputy Treasurer
Oscar J. Estevez

5. Mailing Address (If post office box or drawer add street address)
2529 SW 8 Street

6. Telephone
(305) 541-4411

7. City
Miami

8. County
Miami-Dade

9. State
Florida

10. Zip Code
33135

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

11. Name of Bank
SunTrust Bank

12. Street Address
9600 Collins Ave.

13. City
Bal Harbour

14. County

15. State
Florida

16. Zip Code
33154

17. Signature of Candidate


Date
02/15/06

Campaign Treasurer's Acceptance of Appointment

I, Oscar J. Estevez, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of Joel S. Jacobi

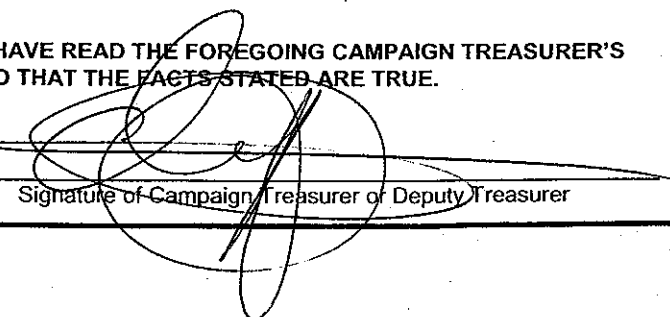
who is seeking nomination or election as a _____ candidate to the office of
(Party)

County Court Judge group 09. 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.**

02/15/06
Date


Signature of Campaign Treasurer or Deputy Treasurer

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**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

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

(Please Type)

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ELECTIONS

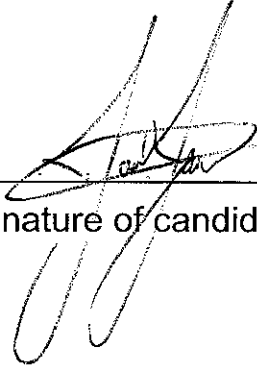
I, JOEL S. JACOBI

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

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ELECTIONS



(Signature of candidate)

02/17/06

(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.

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ELECTIONS

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

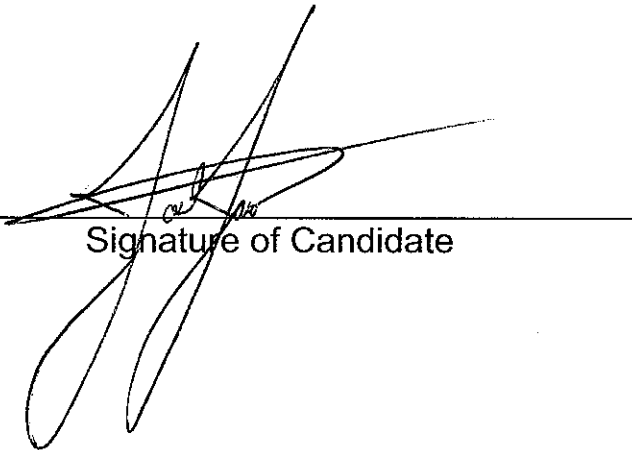
(Please Type)

I, JOEL S. JACOBI,

candidate for the office of County Court Judge Group 09;

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

X



Signature of Candidate

02/17/06

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:

JOEL

S.

JACOBI

First Name

Middle Name

Last Name

Office: County Court Judge Group # 09

This is to acknowledge my receipt of the following documents:

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

Received by: _____

Candidate Signature

Date: 02/16/06

MIAMI-DADE ELECTIONS

2006 FEB 17 PM 4: 07

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JUDICIAL OFFICES LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

2006 MAY 1 OFFICE USE ONLY

MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

STATE OF FLORIDA

_____ COUNTY

(PLEASE PRINT)

I, <u>JOEL</u>	<u>SCOTT</u>	<u>JACOBI</u>
First Name	Middle Name/Initial	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, JOEL JACOBI
(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 County Court Judge, _____, _____, _____
(office) (district) (circuit)
09 . 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



Signature of Candidate

<u>12555 Biscayne Blvd. #844</u>	<u>(305) 893-4135</u>	<u>(305) 893-4173</u>
Mailing Address	Day Phone	Fax Number
<u>Miami</u>	<u>Florida</u>	<u>33181</u>
City	State	Zip Code
		<u>04/16/06</u>
		Date Signed

