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

OFFICE USE ONLY 2006 JUN 13 PM 12: 41

MIAMI-DADE

(Section 106.021(1), F.S.)	ELECTIONS
(PLEASE TYPE)	
,	
CHECK APPROPRIATE BOX:	
Original Appointment Deputy Treasurer	Reappointment of Treasurer Secondary Depository
Name of Candidate	Address (include post office box or street, city, state, zip code)
MANNY ANON, JR.	8971 SW 60th Terrace
	8971 SW 60th Terrace M. Ami Horida 33173-1612
Telephone (optional) 2. Party (Partisan candidates only	
(305) 598-153/	y) 3. Office (add district, circuit or group number) School Board District
	npaign Treasurer Deputy Treasurer
4. Name of Treasurer or Deputy Treasurer	
Lourdes M. Madariaa 5. Mailing Address (If post office box or drawer add street address	9
	6. Telephone
6101 SW. 93 Avenue	
7. City 8. County	9. State 10. Zip Code
Miami Miami-Dade	Fbrida 33173
I have designated the following named bank as my	nary Depository Secondary Depository
44 14 (5)	40.04
OCEAN BANK	780 NW 42° Avenue
13. City M. AM. 14. County M. AM.	12. Street Address 780 NW 42^A Avenue 15. State 16. Zip Code ADE HONDA 33 126
17. Signature of Candidate //	Date
X MMM Ch	10 June 2006
Campaign Treasurer's A	cceptance of Appointment
Campaign Headulet 5 A	cceptance of Appointment
1. lourdes M. Madariaga	, do hereby accept the appointment as
(Please Print or Type)	-
Campaign Treasurer Deputy Treasurer for the	campaign of MANNY ANON, JR.,
who is seeking nomination or election as a	V/A candidate to the office of
School Board Defrict & Asaduly	(Party) v registered voter in
County, Florida, I am qualified to accept this appointment.	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I I	HAVE READ THE FOREGOING CAMPAIGN TREASURER'S D THAT THE FACTS STATED ARE TRUE.
,	
10- June-2006	Mmadaiiaa
Dota Data	Signature of Campaign Treasure/or Deputy Treasurer
4 Date	orginatoro or ourripuigir rrouburgiyor bopaty rrouburor

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

DS-DE 9 (Rev. 08/03)

OFFICE USE ONLY 2006 JUN 13 PM 12: 41

> MIAMI-DADE ELECTIONS

(PLE	ASE TY	PE)						
CHECK APPROPRIATE BO	X:							
Original Appointment		Deputy Treas	urer	Reappo	intment of	Treasurer		Secondary Depository
Name of Candidate MANNY	Aus	11 10		1. Address	(include po	st office box	or str	reet, city, state, zip code)
I PUANUN) I	700			-				33/73-16/2
Telephone (optional) (305) 59 9-1531	2. Party	(Partisan can	•	у)	3. Office			it or group number)
I have appointed the following	g person	to act as my	∑ Can	npaign Trea	surer	Deputy	Trea	asurer
4. Name of Treasurer or Dep		surer A.	Nade	riag	Co,			
5. Mailing Address (If post of <i>GIO</i> / <i>S</i>	ice box	or drawer add s	street addres	ss)		6. Te	eleph	one
7. City MiAM;	8.0	Oounty Minmi- D		9. State	Yori da	,		Zip Code <i>3</i> 3/73
I have designated the following	ng name	d bank as my	X Print	/ nary Deposi	tory	Secondary	/ Dep	ository
11. Name of Bank OCFAN	ANK	<	,	780	et Address) NG) 42 ^h	d	Avenue
13. City <i>M. Ami</i>		14. County	m' - Di	D€	15. State	RIDA		16. Zip Code 3312 (
17. Signature of Candidate	A.	g/p				į	Date	
I, Manny Campaign Treasurer	400	Daign Treas	Type)			, do he	ereby	accept the appointment as $\frac{1}{2}$
who is seeking nomination or	election	ı as a		VIA	-			candidate to the office of
School Board) ₃ /,	1.146	. As a dul	(Par		Minn	7/ -	DADE
County, Florida, I am qualifie	d to acce	ept this appoint	ment.					
UNDER PENALTIES C ACC		URY, I DECLA CE OF APPOIN						
10 June.	200	6	X	1	M		4	<u> </u>
Dat	е			Signatur	of Camba	Ign Heasure	_or/D	eputy Treasurer

2006 MAY 32 PM 3: 01

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

OFFICE USE DELY ELECTIONS

candidate for the office of School Board District & ;

have received, read and understand the requirements of Chapter 106,

Florida Statutes.

X Modern June 1, 2006

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 Doral, FL 33172 Phone: (305)

2006 JUL 20 PM 2: 05

Phone: (305) 499-8400 NS DEPARTHENT

RECEIPT						
Candidate:						
MANNY		ANON JR				
First Name	Middle Name	Last Name				
Officer Cabaci Board F	richaigh #Co					
Office: School Board D	DISTRICT % &					
This is to acknowledge m	y receipt of the following	ng documents:				
☑ Qualifying Handbook School Board	c for Candidates for N	liami-Dade County				
Received by:	Candidate Sign	n rature				
Date: 7/19/	2001					

LOYALTY OATH

CANDIDATES WITH NO PARTY AFFILIATION

2005 office Use Ohuz: 06

ELECTIONS DEPARTMENT

(Sections 876.05-876.10, Florida S	łatutes)	h- €. <u>€</u> €	- HOMS DEPA	RTHENT
STATE OF FLORIDA	•	Ma	AMI-DAZ	COUNTY
	(PLEASE	PRINT)		
I, MANNY			ANON	JR.
First Name	Middle Nam	ne/Initiał	Lást	Name
a citizen of the State of Florida and of the hereby solemnly swear or affirm that I	he United States owill support the Co	of America, an nstitution of the Ur	d a candidate fon nited States and	or public office do lof the State of Florida.
I, MANN)	OATH OF C (Section 99.021,	Florida Statutes)		
(PLEASE PRINT NAME AS YOU WISH IT T	O APPEAR ON THE BALLOT	NAME MAY NOT BE CHA	NGED AFTER THE END	OF QUALIFYING)
am a candidate for the office of	rhas/B.	sard.	#6	,
	(office)		(district)	(circuit)
. I am a qualified ele	ector of	AMI-DADE	County,	Florida. I am qualified
(group)				
under the Constitution and the Laws of have qualified for no other public office with the office I seek; and I have resign 99.012, Florida Statutes.	e in the state, the	term of which offi	ce or any part	thereof runs concurrent
			· · · · · · · · · · · · · · · · · · ·	E 20
UNDER PENALTIES OF PERJURY, I DEC	CLARE THAT I HAV	E READ THE FORE	EGOING LOYAL	TY OATH AND OATH OF
CANDIDATE AND THAT THE PACTS ST	ATED IN CACITAIN	- INOL.		25 17
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	Ferrace	(303/592	<u>8-15 31</u> (305/418-4803
Mailing Address		Day Phone		Fax Number
MAMI FR	Sori DA	33173	 –	7/11/2006
City	State	Zip Code	Da	te Signed

OFFICIAL RECEIPT MIAMI-DADE COUNTY-FLORIDA

No.5331770

Dept.:	THIS RECEIPT N	For Payment of:	AMOUNT OF: Ore		ı		_		-	COUNTY
Elections	THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EN	FOR PAYMENT OF: Qualisying Fee - School Board Dist 6	AMOUNT OF: One Thousand Foun Hundred and Sixty Dollars, AND 76 CENTS		MINMI		ADDRESS 8971 SW 60 TRARACC	4	RECEIVED FROM	
	SS DATED, COMPI	Fic - Scho	and and Sixty Do	TTY		STREET ADDRESS	SW 60 TI		MANNY MON SIR	•
Ву:_	LETED AND SIGN	of Board	LLARS, AND 76	STATE	F/	DRESS	EKR ACC		'ON S/R.	
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, Resola			OTAL \$:		HECKS \$		CASH \$	MONTH	DATE 7 /	
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