

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

2006 JUL 13 PM 2:27

MIAMI-DADE
ELECTIONS

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate: ALBERTO L. SANTANA 1. Address (include post office box or street, city, state, zip code): 10811 SW 69 Drive

Telephone (optional): 305-282-9289 2. Party (Partisan candidates only): 3. Office (add district, circuit or group number): Community Council 12, Subarea 123

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

4. Name of Treasurer or Deputy Treasurer: ALBERTO L. SANTANA

5. Mailing Address (If post office box or drawer add street address): 10811 SW 69 Drive 6. Telephone: 305-282-9289

7. City: Miami 8. County: Miami-Dade 9. State: FL 10. Zip Code: 33173

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

11. Name of Bank: BANK of AMERICA 12. Street Address: 8991 SW 107 Ave.

13. City: Miami 14. County: Miami-Dade 15. State: FL 16. Zip Code: 33176

17. Signature of Candidate: [Signature] Date: 7/13/2006

Campaign Treasurer's Acceptance of Appointment

I, ALBERTO L. SANTANA, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of ALBERTO L. SANTANA

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

Community Council 12, Subarea 123 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.**

7/13/2006
Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer

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ELECTIONS

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

I, ALBERTO C. SANTANA,

candidate for the office of Community Council 12, Subarea 123 ;

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

Florida Statutes.

X 
Signature of Candidate

7/13/2006
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).

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**Campaign Treasurer's Report
Filing Requirement
Electronic Filing Statement
For Miami-Dade County Candidates**

MIAMI-DADE
ELECTIONS

I, ALBERTO C. SANTANA, candidate for the office of Community Council 12, SUBAREA 123, have received, read, and understand the Miami-Dade County policy regarding Campaign Treasurer's Reports for Miami-Dade Mayor, County Commission, and Community Council candidates.

In order to comply with the requirement I declare that I understand that Campaign Treasurer Reports be filed on diskettes or CD-ROMS simultaneously with and in addition to the original signed report, I further declare that:

- I will purchase the necessary software.
- I will use the software provided by the Supervisor of Elections.


Signature of Candidate

7/13/2006
Date

305-282-9289
Day time Phone #

ACSANTANA@BELLSOUTH.NET
E-mail address

MIAMI-DADE COMMUNITY COUNCIL LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

MIAMI-DADE COUNTY

(PLEASE PRINT)

I,

ALBERTO	L	SANTANA
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,

ALBERTO SANTANA

(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 office of Miami-Dade Community Council Area # 12 Subarea # 123
(office)

I am a qualified elector of Miami-Dade County, Florida; I am qualified under the Constitution and the Laws of Florida and the Home Rule Charter of Miami-Dade County to hold the office to which I desire to be nominated or elected. 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 from which I am required to resign pursuant to Section 99.012, Florida Statutes.

CANDIDATE CERTIFICATION

I, hereby, certify that I am a qualified elector of Unincorporated Miami-Dade County, and that I have been a resident elector of the subarea for which I am qualifying for three (3) months prior to qualifying. I am submitting a copy of the following as proof of my residency in the subarea for the prescribed period:

driver's license property tax receipt homestead exemption receipt
 utility bill lease agreement

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

10811 SW 69 Drive

Current Address of Legal Residence

(305) 412-7327 (305) 279-2612

Day Phone

Fax Number

(305) 282-9289

Other Phone Number

ALSANTANA@BELLSOUTH.NET

Email Address

Miami

City

FL

State

33173

Zip Code

7/16/06

Date Signed

I, the candidate whose name appears above, do affirm that I meet the minimum residency requirements for this office and that the information provided on this form and any attachments hereto are true.

State of Florida, County of Miami-Dade

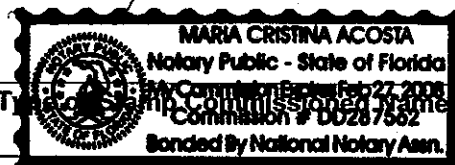
Sworn to (or affirmed) and subscribed before me this 17th day of July, 2006 by Alberto Santana

Signature of Notary Public - State of Florida

Personally known to me

Identification provided

Print, T



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2006 JUL 17 PM 1:51
ELECTIONS DEPARTMENT
MIAMI-DADE COUNTY

