

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

2006 JUL 17 PM 4:30

MIAMI DADE COUNTY
 ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate: Martin Luther Lampkin 1. Address (include post office box or street, city, state, zip code): 10235 SW 172ST Miami, FL 33157

Telephone (optional): (305) 232-8490 2. Party (Partisan candidates only): 3. Office (add district, circuit or group number): 31A Community Council 14 43

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

4. Name of Treasurer or Deputy Treasurer: Martin Lampkin

5. Mailing Address (If post office box or drawer add street address): 10235 SW 172ST 6. Telephone: 305-232-8490

7. City: Miami 8. County: Miami Dade 9. State: FL 10. Zip Code: 33157

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

11. Name of Bank: Bank Atlantic 12. Street Address: 13593 S. Dixie Hwy. *

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

17. Signature of Candidate: X Martin L Lampkin Date: 7/17/2006

Campaign Treasurer's Acceptance of Appointment

I, Martin Luther Lampkin, do hereby accept the appointment as
 (Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of Martin Lampkin

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

Community Council 14 ^(Sub-C Party) (143) 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.

July 17/2006
 Date

X Martin L Lampkin
 Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

2006 JUL 17 PM 4:30

MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

I, Martin Luther Lampkin
candidate for the office of Community Council 14 ^{sub area} (143)

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

x Martin Luther Lampkin
Signature of Candidate

July 17, 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).



Miami-Dade Supervisor of Elections
2700 NW 87th Avenue
Miami, FL 33172

(305) 499-8400

RECEIVED

MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

RECEIPT

Candidate:

Martin

First Name

Luther

Middle Name

Lampkin

Last Name

Office: Community Council Area 14 / Subarea # 143

This is to acknowledge my receipt of the following documents:

- Qualifying Handbook for Candidates for Miami-Dade County Community Council**

Received by: *Martin Luther Lampkin*
Candidate Signature

Date: 7 / 17 / 06

RECEIVED

2006 JUL 17 PM 4:37

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT



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

I, Martin Luther Lampkin, candidate for the office of Community Council 14 (sub 143) 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.

Martin Luther Lampkin
Signature of Candidate

7/17/2006
Date

305-232-8490
Day time Phone #

wpoc99@hotmail.com
E-mail address

MIAMI-DADE COMMUNITY COUNCIL LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

MIAMI-DADE COUNTY

(PLEASE PRINT)

2006 JUL 18 PM 2:04

I,

<u>Martin</u> First Name	<u>Luther</u> Middle Name/Initial	<u>Lampkin</u> 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, Martin Luther Lampkin

(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 # 14 Subarea # 143
(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

Martin Luther Lampkin
Signature of Candidate

10235 SW 172 ST
Current Address of Legal Residence

(305) 232-8490)
Day Phone Fax Number

()
Other Phone Number

wpoc99@hotmail.com
Email Address

Miami
City

FL
State

33157
Zip Code

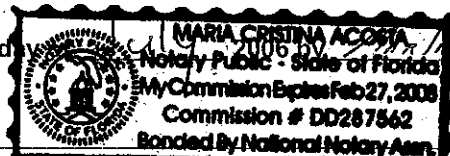
7/17/2006
Date Signed

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 18 day of July 2006 by Martin Luther Lampkin

[Signature]
Signature of Notary Public - State of Florida



Print, Type or Stamp Name and Title of Notary Public

- Personally known to me
 Identification provided



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 5331760

RECEIVED FROM Martin Luther Lampkin

DATE 7 / 18 / 06
MONTH DAY YEAR

ADDRESS 10235 SW 172 St.
STREET ADDRESS

CASH \$

Miami CITY FL STATE 33157 ZIP

CHECKS \$ 100.00

AMOUNT OF: One hundred DOLLARS, AND 00 CENTS TOTAL \$ 100.00

FOR PAYMENT OF: Qualifying Fee - Comm. Council 14/143

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.
DEPT.: Elections BY: Rena G. Sauter

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

CAMPAIGN ACCOUNT FOR MARTIN LUTHER LAMPKIN

0082
63-8376/2670
802

DATE 7/18/2006

PAY TO THE ORDER OF BOARD OF COUNTY COMMISSIONERS \$ 100.00
AND 00/100 DOLLARS

ONE HUNDRED

BankAtlantic
FLORIDA'S MOST CONVENIENT BANK

FOR QUALIFY FEE CC 14-143

Martin Luther Lampkin

#0000087# 1:2670837631: 0059834919#