

**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
RECEIVED
2006 JUL 17 PM 3:43
MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate: Deborah A. Vaz
1. Address (include post office box or street, city, state, zip code):
12020 SW 271st
Naranja FL 33032

Telephone (optional): _____ 2. Party (Partisan candidates only): _____ 3. Office (add district, circuit or group number):
CC 15 Sub Area 153

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

4. Name of Treasurer or Deputy Treasurer:
Deborah Vaz

5. Mailing Address (If post office box or drawer add street address):
12020 SW 271st A 6. Telephone:
305-258-9801

7. City: Naranja 8. County: Dade 9. State: FL 10. Zip Code: 33032

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

11. Name of Bank: 0089-8314-3316 12. Street Address:
Bank of America 18341 SO. Dixie Hwy

13. City: Miami 14. County: Dade 15. State: FL 16. Zip Code: 33157

17. Signature of Candidate: X  Date: 7/16/07

Campaign Treasurer's Acceptance of Appointment

I, Deborah A. Vaz, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of Deborah Vaz

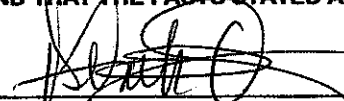
who is seeking nomination or election as a NOP candidate to the office of
(Party)

CC 15 Sub Area 153 . As a duly registered voter in Dade County FL

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.**

7/16/06
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

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ELECTIONS DEPARTMENT

STATEMENT OF CANDIDATE

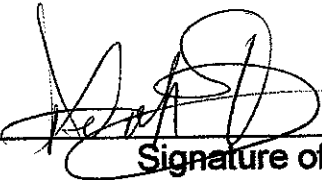
(Section 106.023, F.S.)
(Please Type)

I, Deborah A. Vaz,

candidate for the office of CC 15 Sub Area 153;

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

X



Signature of Candidate

7/16/06

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

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RECEIPT	MIAMI DADE COUNTY ELECTIONS DEPARTMENT
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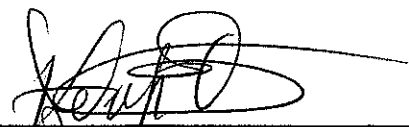
Candidate:

<u>Deborah</u>	<u>Ann</u>	<u>Vaz</u>
First Name	Middle Name	Last Name

Office: Community Council Area 15 / Subarea # 153

This is to acknowledge my receipt of the following documents:

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

Received by: 
 Candidate Signature

Date: 7/10/07



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

RECEIVED

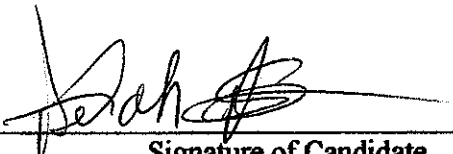
2006 JUL 17 PM 3:43

MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

I, Deborah A. Vaz, candidate for the office of CC 15 Sub Area 153, 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

7/16/06
 Date

305-962-7128
 Day time Phone #

deborah.vaz@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)

RECEIVED

I,

Deborah

A.

Vaz JUL 17 PM 3:43

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,

Deborah A. Vaz

(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 # 15 Subarea # 153
(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.

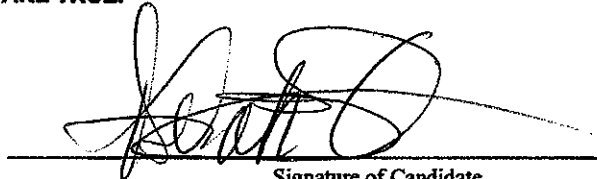
CANDIDATE CERTIFICATION

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

12020 SW 271 St

Current Address of Legal Residence

(305) 962-7128 (305) 237-5019

Day Phone

Fax Number

(305) 258-9801

Other Phone Number

deborahvaz@bellsouth.net

Email Address

Naranja

City

FL

State

33032

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 16TH day of JULY, 2006 by



Signature of Notary Public - State of Florida



Notary Public State of Florida
William E Coleman Sr.
My Commission DD435017
Expires 05/30/2009

Print, Type or Stamp Commissioned Name of Notary Public

Personally known to me

Identification provided



OFFICIAL RECEIPT

MIAMI-DADE COUNTY-FLORIDA

No. 5331751

RECEIVED FROM Deborah A. Vaz

DATE 7, 17, 06
MONTH DAY YEAR

ADDRESS 12020 SW 271 St
STREET ADDRESS

CASH \$

Naranja CITY

FL STATE 33032 ZIP

CHECKS \$ 100.00

AMOUNT OF: One hundred DOLLARS, AND 00 CENTS

TOTAL \$ 100.00

FOR PAYMENT OF: Qualifying Fee - Comm. Council 15/153

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

DEPT.: Elections

By: Nera A. Sarter

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

COMPANION CHECK OF
Deborah Vaz

0991
63-47630 FL
1443

DATE 7/17/06

PAY TO THE ORDER OF Board of County Commissioners \$ 100.00

One hundred dollars & 00/100 DOLLARS

Bank of America

FOR Qualifying fee Area 15 Sub Area 153

[Signature]

⑈000991⑈ ⑆063000047⑆ 008983143316⑈