

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 4:01  
MIAMI DADE COUNTY  
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment    Deputy Treasurer    Reappointment of Treasurer    Secondary Depository

Name of Candidate: WILLIE J. HARRIS  
1. Address (include post office box or street, city, state, zip code):  
27310 SW. 153 AVE  
Homestead, FLA. 33032  
Telephone (optional):  
2. Party (Partisan candidates only):  
3. Office (add district, circuit or group number):  
CC-14 / SUB AREA 145

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

4. Name of Treasurer or Deputy Treasurer:  
KEN FORBES

5. Mailing Address (If post office box or drawer add street address):  
25121 S.W. 120 PL  
6. Telephone:  
(305) 258-2587

7. City: PRINCETON   8. County: MIAMI-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: #008983143345  
BANK OF AMERICA - 00898314  
12. Street Address:  
18341 S. Dixie Hwy

13. City: MIAMI   14. County: DADE   15. State: FL   16. Zip Code: 33157

17. Signature of Candidate: X [Signature]   Date: 7/16/06

Campaign Treasurer's Acceptance of Appointment

I, KEN FORBES, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer    Deputy Treasurer   for the campaign of WILLIE J. HARRIS

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

CC-14 / SUB AREA 145 . 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.

7/16/06  
Date

X [Signature]  
Signature of Campaign Treasurer or Deputy Treasurer

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MIAMI DADE COUNTY  
ELECTIONS DEPARTMENT

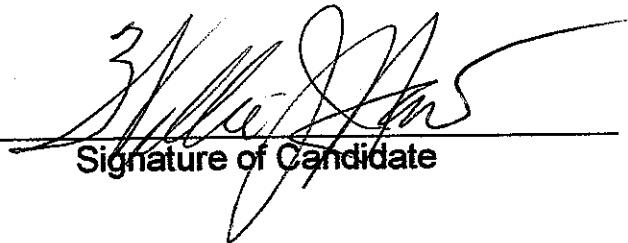
# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

I, WILLIE J. HARRIS,  
candidate for the office of Community Council 14 - sub area 1A5

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 87<sup>th</sup> Avenue  
Miami, FL 33172

(305) 499-8400

2006 JUL 17 PM 4:01

**RECEIPT**

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**Candidate:**

Willie                      James                      Harris  
First Name                      Middle Name                      Last Name

**Office:** Community Council Area 14 / Subarea # 145

This is to acknowledge my receipt of the following documents:

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

**Received by:** Willie Harris  
Candidate Signature

**Date:** 7/16/06



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

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2006 JUN 17 PM 4:01  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

I, WILLIE J. HARRIS, Candidate for the Office of CCC 14-Subarea 145, have received, read, and understand the Miami-Dade County policy regarding Campaign Treasurer's Reports for Miami-Dade Mayor, County Commission and Community Council Members.

In order to comply with the requirement, I declare that I understand that Campaign Treasurer Reports be filed electronically, and in addition to the original signed report, I further declare that:

- I will use the website provided by the Supervisor of Elections.
- I will upload the data from my software to the Supervisor of Elections website.

*Willie J. Harris*  
Signature of Candidate

7/14/06  
Date

786-243-1599  
Day time Phone #

revharrisfsj@yahoo.com  
E-mail address

786-243-1599  
Fax #

This form must be filed within (5) five business days of opening the Campaign Account.

# MIAMI-DADE COMMUNITY COUNCIL LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

RECEIVED  
MIAMI-DADE COUNTY  
2006 JUL 17 PM 4:01  
MIAMI HARRIS  
ELECTIONS DEPARTMENT

(PLEASE PRINT)

I,

Willie	James	Harris
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,

<sup>WJH</sup>  
~~Rev. Dr.~~ Willie J. Harris

(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 # 145  
(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

*Willie J. Harris*  
Signature of Candidate

27310 SW. 153 AVE  
Current Address of Legal Residence

(786) 243-1599      (786) 243-1599  
Day Phone      Fax Number

( )  
Other Phone Number

reuharrisfsj@yahoo.com  
Email Address

Homestead  
City

FLA.  
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

*William E. Coleman Sr.*  
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

