

**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  
2007 JUL - 9 12:35  
MIAMI DADE COUNTY  
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depositor

Name of Candidate: Barbara J. Jordan  
1. Address (include post office box or street, city, state, zip code): 2251 NW 188 Terrace, Miami, FL 33156

Telephone (optional): (305) 620-0342  
2. Party (Partisan candidates only): N/A  
3. Office (add district, circuit or group number): County Commissioner, District 1

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

4. Name of Treasurer or Deputy Treasurer: Anthony Brunson

5. Mailing Address (If post office box or drawer add street address): One Southeast 3rd Avenue, Suite 2100  
6. Telephone: (305) 374-1574

7. City: Miami    8. County: Miami-Dade    9. State: FL    10. Zip Code: 33131

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

11. Name of Bank: Suntrust Bank  
12. Street Address: One Southeast 3rd Avenue

13. City: Miami    14. County: Miami-Dade    15. State: FL    16. Zip Code: 33131

17. Signature of Candidate: X *Barbara J. Jordan*    Date: 6/18/07

**Campaign Treasurer's Acceptance of Appointment**

I, Anthony Brunson, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer     Deputy Treasurer    for the campaign of Barbara J. Jordan

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

County Commissioner, District 1 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.

6/20/07    X    *Anthony Brunson*  
Date    Signature of Campaign Treasurer or Deputy Treasurer

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

I, Barbara J. Jordan

candidate for the office of District 1 County Commissioner

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

X Barbara J. Jordan  
Signature of Candidate

6/29/07  
Date

2007 JUL 16 PM  
MIAMI-DAD  
ELECTIONS

RECEIVED

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

**RECEIPT OF HANDBOOKS AND THE ELECTION LAW BOOK**

**Candidate:**

Barbara                      J.                      Jordan  
 First Name                      Middle Name                      Last Name

Office: Miami Dade County Commission District 1

This is to acknowledge my receipt of the following documents:

- The Election Laws of the State of Florida August 2006
- 2006 Candidate and Campaign Treasurer Handbook
- 2008 Miami-Dade County Qualifying Handbook

RECEIVED  
 2008 JUN 13 PM 2:06  
 MIAMI DADE COUNTY  
 ELECTIONS DEPARTMENT

Received by: Barbara J. Jordan  
 Candidate Signature

Date: 6/11/08

Phone No.: 305-621-5345 Fax No.: 305-621-5345

E-mail address: mable87@bellsouth.net



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

**RECEIVED**  
 2007 JUN 27 PM 12:15  
 MIAMI-DADE COUNTY  
 ELECTIONS DEPARTMENT

I, Barbara Jordan, Candidate for the Office of Miami-Dade Commissioner Dist 1, 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.

Barbara J. Jordan  
 Signature of Candidate

6/18/07  
 Date

305-621-5345  
 Day time Phone #

Eddiejordan@aol.com  
 E-mail address

305-621-5345  
 Fax #

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



**OFFICIAL RECEIPT**  
MIAMI-DADE COUNTY-FLORIDA

No. 5331957

RECEIVED FROM Barbara Jordan

DATE 6 / 13 / 08  
MONTH DAY YEAR

ADDRESS 1 SE 3rd Ave. Ste 2100  
STREET ADDRESS  
Miami CITY FL STATE 33131 ZIP

CASH \$ \_\_\_\_\_

CHECKS \$ 360.00

AMOUNT OF: Three hundred sixty DOLLARS, AND 00 CENTS TOTAL \$ 360.00

FOR PAYMENT OF: Qualifying Fee - County Comm. #1

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

DEPT.: Elections By: Nora G. Sarter

**FOR OFFICE USE ONLY**

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

1012

**BARBARA J JORDAN** 0607  
1 SE 3RD AVENUE, SUITE 2100  
MIAMI FL 33131  
(305) 975-6694  
Campaign Account  
County Commissioner District 1

SUNTRUST BANK  
63215631

6/12/2008

\$\*\*360.00

RAY TO THE ORDER OF Board of County Commissioners

Three Hundred Sixty and 00/100 \*\*\*\*\* DOLLARS

MEMO Qualifying Fee County Commissioner District 1

VOID AFTER 90 DAYS  
Nora G. Sarter

# MIAMI-DADE COUNTY LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

MIAMI-DADE COUNTY

(PLEASE PRINT)

I,

BARBARA

First Name

J.

Middle Name/Initial

JORDAN

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

RECEIVED  
2008 JAN 13 PM 2:06  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

## OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, BARBARA J JORDAN

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING PERIOD)

am a candidate for the office of Miami-Dade County COMMISSION DISTRICT 1  
(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 district for which I am qualifying for six (6) months prior to qualifying. I am submitting a copy of the following as proof of my residency in the district 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**

Barbara J. Jordan  
Signature of Candidate

2251 N.W. 188<sup>TH</sup> TERR.

Current Address of Legal Residence

(305) 621-5345

Day Phone

Fax Number

(305) 588-5227

Other Phone Number

MABLE87@BELL SOUTH.NET

Email Address

MIAMI GARDENS

FL

33056

Zip Code

JUNE 11, 2008

City

State

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 June day of 2008 by BARBARA J JORDAN

Gina L Ford  
Signature of Notary Public - State of Florida

Signature of Notary Public - State of Florida

Print, Type of Stamp, Commissioned Name of Notary Public

Personally known to me

Identification provided



GINA L. FORD  
MY COMMISSION # DD 398787  
EXPIRES: March 7, 2009

GINA L. FORD



GINA L. FORD  
MY COMMISSION # DD 398787  
EXPIRES: March 7, 2009  
Bonded Thru Budget Notary Services