

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE TYPE)

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MIAMI DADE
ELECTIONS

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate

Jeff Wander

1. Address (include post office box or street, city, state, zip code)

4829 SW 154 Avenue, Miami, FL 33185

Telephone (optional)

305-223-1054

2. Party (Partisan candidates only)

3. Office (add district, circuit or group number)

Community Council 11/112

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

4. Name of Treasurer or Deputy Treasurer

Martha Wander

5. Mailing Address (If post office box or drawer add street address)

4829 SW 154 Avenue, Miami, FL 33185

6. Telephone

305-223-1054

7. City

Miami

8. County

Miami-Dade

9. State

Florida

10. Zip Code

33185-4443

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

11. Name of Bank

Bank of America

12. Street Address

15141 SW 42 Street

13. City

Miami

14. County

Miami-Dade

15. State

Florida

16. Zip Code

33185

17. Signature of Candidate

X

Date

10/18/07

Campaign Treasurer's Acceptance of Appointment

I, Martha Wander, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of Jeff Wander

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

Community Council 11/112 . 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.

10/15/07
Date

X Jeff Wander
Signature of Campaign Treasurer or Deputy Treasurer

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ELECTIONS

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

I, Jeff Wander,

candidate for the office of Miami-Dade Community Council 11/12;

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

X


Signature of Candidate

10/8/07
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).



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

I, JEFF WANDER, candidate for the office of Community Council 11/12, 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

10/8/2007
Date

305-562-0551
Day time Phone #

WANDERT@BELLSOUTH.NET
E-mail address

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Miami-Dade Supervisor of Elections
 2700 NW 87th Avenue
 Miami, FL 33172 (305) 499-8400

RECEIPT OF HANDBOOKS AND THE ELECTION LAW BOOK

Candidate:

JEFFREY CHARLES WANDER
 First Name Middle Name Last Name

Office: Community Council 11/112

This is to acknowledge my receipt of the following documents:

The Election Laws of the State of Florida as of September 2007

- Hard Copy
- Downloaded from Internet

2008 Miami-Dade County Qualifying Handbook

- Hard Copy
- Downloaded form Internet

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 2008 JUN 13 PM 1:21
 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

Received by: *J. Wander*
 Candidate Signature

Date: 6/13/2008

Phone No.: 305-562-0551 Fax No.: _____

E-mail address: jeffwander@yahoo.com

LOYALTY OATH FOR MIAMI-DADE COUNTY COMMUNITY COUNCIL MEMBER

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA Miami-Dade County

I,	<u>JEFFREY</u>	<u>CHARLES</u>	<u>WANDER</u>
	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, JEFF WANDER
(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: **Community Council Member Area 11 Subarea 112**

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 concurrently 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

- I have been a Miami-Dade County resident elector for at least three years prior to qualifying.
- I have been a resident elector of the Council Area 11 for at least six (6) months prior to qualifying.
- I have been a resident elector of the Subarea 112 for at least three (3) 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.

X [Signature] 305-562-0551 jeffwander@yahoo.com
 Signature of Candidate Daytime Telephone Number Email Address

4829 Sw 154 Ave Miami FL 33185
 Address City State Zip Code

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 13th day of JUNE, 2008 by Jeffrey Wander.

Personally Known: or
 Produced Identification:

Type of Identification Produced:

FL Drivers Lic

[Signature]
 Signature of Notary Public - State of Florida
 Print, Type or Stamp Commissioned Name of Notary Public

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 MIAMI-DADE COUNTY
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