

**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

08 MAY 29 AM 10:47

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer

Name of Candidate: Jim Shedd 1. Address (include post office box or street, city, state, zip code): 17720 SW 76 Ave Palm Beach Gardens FL 33157

Telephone (optional): (305) 796-7344 2. Party (Partisan candidates only): 3. Office (add district, circuit, group number): Miami Dade County Property Appraiser

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

4. Name of Treasurer or Deputy Treasurer: OSCAR L. HERWANDER

5. Mailing Address (If post office box or drawer add street address): 1685 JEFFERSON AVE #1 6. Telephone: 305-979-1937

7. City: Miami Beach 8. County: MIAMI-DADE 9. State: FL 10. Zip Code: 33139

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

11. Name of Bank: COLONIAL BANK 12. Street Address: 9770 NW 27th

13. City: Miami 14. County: MIAMI-DADE 15. State: FL 16. Zip Code: 33172

17. Signature of Candidate: X [Signature] Date: 5-28-08

Campaign Treasurer's Acceptance of Appointment

I, OSCAR L. HERWANDER, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of JIM SHEDD

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

Miami Dade County Property Appraiser

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.

5-28-08
Date

X [Signature]
Signature of Campaign Treasurer or Deputy Treasurer

RECEIVED

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

OFFICE USE ONLY
2008 APR 17 PM 2:39

MIAMI DADE
ELECTIONS

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer

Name of Candidate: JAMES A. SHEDD
1. Address (include post office box or street, city, state, zip code):
17720 SW 76 AV PALMETTO BAY FL 33157

Telephone (optional): (305) 796-7344
2. Party (Partisan candidates only):
3. Office (add district, circuit, group number): COUNTY PROPERTY APPRAISER

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

4. Name of Treasurer or Deputy Treasurer:
JAMES A. SHEDD

5. Mailing Address (if post office box or drawer add street address): 17720 SW 76 AV PALMETTO BAY FL 33157
6. Telephone: 305-796-7344

7. City: PALMETTO BAY 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: COLONIAL BANK 12. Street Address: PALMETTO BAY FL 33157
16800 OLD COTLER RD

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

17. Signature of Candidate: X [Signature] Date: 4/17/08

Campaign Treasurer's Acceptance of Appointment

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

Campaign Treasurer Deputy Treasurer for the campaign of COUNTY PROPERTY APPRAISER

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

COUNTY PROPERTY APPRAISER

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.

4/17/08

Date

X [Signature]

Signature of Campaign Treasurer or Deputy Treasurer

RECEIVED

2008 APR 17 PM 2:39

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY
ELECTIONS

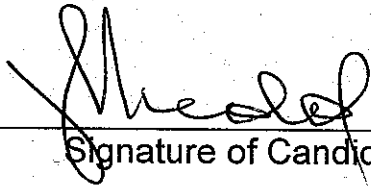
I, JAMES A. SHELD,

candidate for the office of COUNTY PROPERTY APPRAISER;

have received, read and understand the requirements of Chapter 106,

Florida Statutes.

X



Signature of Candidate

4/17/08

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

RECEIPT OF HANDBOOKS AND THE ELECTION LAW BOOK

Candidate:

JAMES ARCHIE SHEDD
 First Name Middle Name Last Name

Office: PROPERTY APPRAISER

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**

RECEIVED
 2008 AUG 20 PM 4: 16
 MIAMI DADE COUNTY
 ELECTIONS DEPARTMENT

Received by: [Signature]
 Candidate Signature

Date: APRIL 17, 08

Phone No.: 305.796.7344 **Fax No.:** _____

E-mail address: JS ROVER@BELLSOUTH.NET



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

I, James A. Shedd, Candidate for the Office of Property Appraiser, 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.

RECEIVED
 2009 JUL 25 PM 4:06
 MIAMI-DADE
 ELECTIONS

James A. Shedd
Signature of Candidate

7/25/08
Date

305-796-7344
Day time Phone #

JSRover@bellsouth.net
E-mail address

Fax #

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

**LOYALTY OATH FOR MIAMI-DADE COUNTY
PROPERTY APPRAISER**

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA Miami-Dade County

I, <u>JAMES</u>	<u>ARCHE</u>	<u>SHEDD</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, Jim SHEDD
(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 County Property Appraiser

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 Miami-Dade County, and a resident of Miami-Dade County for at least three (3) years 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] 305-796-7344 JSROVER@BELLSOUTH.NET

Signature of Candidate Daytime Telephone Number Email Address

Address 17920 SW 76th City PALMETTO BAY State FL Zip Code 33157

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 20th day of August, 2008 by James Shedd

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

NOTARY PUBLIC-STATE OF FLORIDA
Maria Cristina Acosta
Commission #DD730644
Expires: FEB. 27, 2012
BONDED THRU ATLANTIC BONDING CO., INC.

RECEIVED
MAMI-DADE COUNTY
ELECTIONS DEPARTMENT
2008 AUG 20 PM 4:16



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 5872162

RECEIVED FROM James A. Shedd

DATE 8, 20, 08
MONTH DAY YEAR

ADDRESS 17720 SW 76th Ave.

CASH \$

Palmetto Bay CITY FL STATE 33157 ZIP

CHECKS \$ 6,530.00

AMOUNT OF: Six thousand five hundred DOLLARS, AND 00 CENTS

TOTAL \$ 6,530.00

FOR PAYMENT OF: Qualifying Fee - Property Appraiser

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

JAMES A SHEDD
STATE OF FLORIDA APPT OF CAMPAIGN
17720 SW 76TH AVE
PALMETTO BAY, FL 33157

63-1322/631
32032

124

DATE 8/20/08

PAY TO THE ORDER OF BOARD OF COUNTY COMMISSIONERS \$ 6,530.00

SIX THOUSAND AND FIVE HUNDRED AND THIRTY DOLLARS Security features are included. Details on back.

COLONIAL BANK, N.A.
Miami, Florida
24 Hr Colonial Connection 1-877-502-2265

FOR: Miami-Dade Property Appraiser Qualifying Fee James A. Shedd MP