

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  
 2008 JUN 16 PM 1:08  
 MIAMI DADE COUNTY  
 ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

- Original Appointment     
  Deputy Treasurer     
  Reappointment of Treasurer

Name of Candidate: George A. Alvarez  
 1. Address (include post office box or street, city, state, zip code):  
9300 W. Flagler St. # 101  
MIAMI, FL 33174

Telephone (optional): (305) 665-1000  
 2. Party (Partisan candidates only):  
 3. Office (add district, circuit, group number):  
Community Council 10/101

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

4. Name of Treasurer or Deputy Treasurer:  
George A. Alvarez

5. Mailing Address (If post office box or drawer add street address):  
9703 S. DIXIE HWY #19 MIAMI  
 6. Telephone:  
305-665-1000

7. City: MIAMI     
 8. County: MIAMI-DADE     
 9. State: FLORIDA     
 10. Zip Code: 33156

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

11. Name of Bank: Inter American Bank  
 12. Street Address: 9190 Coral Way  
 13. City: MIAMI     
 14. County: MIAMI-DADE     
 15. State: FL.     
 16. Zip Code: 33165.

17. Signature of Candidate: X George Alvarez  
 Date: 6/16/2008

Campaign Treasurer's Acceptance of Appointment

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

Campaign Treasurer     
 Deputy Treasurer     
 for the campaign of George A. Alvarez

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

Community Council 10/101,

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.

6/16/2008  
 Date

X George Alvarez  
 Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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ELECTIONS DEPARTMENT

I, George A. Alvarez  
candidate for the office of Community Council 10/101;  
have received, read and understand the requirements of Chapter 106,  
Florida Statutes.

X George Alvarez  
Signature of Candidate

6/16/2008  
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

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

**Candidate:**

George                      A                      Alvarez  
 First Name                      Middle Name                      Last Name

**Office:** Community Council 10/101

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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 ELECTIONS DEPARTMENT

**Received by:** *George Alvarez*  
 Candidate Signature

**Date:** 6/16/2008

**Phone No.:** 305-665-1000      **Fax No.:** 305-661-7244

**E-mail address:** \_\_\_\_\_



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

I, George A. Alvarez, candidate for the office of Community Council 10/101, 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 electronically simultaneously with and in addition to the original signed report, I further declare that:

- I will use the software provided by the Supervisor of Elections.

George A. Alvarez  
Signature of Candidate

6/16/2008  
Date

Day Time Phone No.: 305-665-1000

E-mail address: \_\_\_\_\_

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MIAMI DADE COUNTY  
ELECTIONS DEPARTMENT

# LOYALTY OATH FOR MIAMI-DADE COUNTY COMMUNITY COUNCIL MEMBER

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA Miami-Dade County

I,	<u>George</u>	<u>A.</u>	<u>Alvarez</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, George A. Alvarez  
(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** 10 **Subarea** 101

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

- 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 10 for at least six (6) months prior to qualifying.
- I have been a resident elector of the Subarea 101 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.**

<u>X George Alvarez</u>	<u>305-665-1000</u>	
Signature of Candidate	Daytime Telephone Number	Email Address

<u>9300 W. Eagles St. #101</u>	<u>MIAMI FL</u>	<u>33156</u>	
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

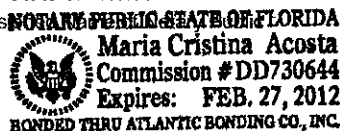
Sworn to (or affirmed) and subscribed before me this 16<sup>th</sup> day of June, 2008 by George A. Alvarez

Personally Known: \_\_\_\_\_ or  
 Produced Identification:

Type of Identification Produced:

FL DRIVERS LIC

Maria Cristina Acosta  
 Signature of Notary Public – State of Florida  
 Print, Type or Stamp Commission #





OFFICIAL RECEIPT

MIAMI-DADE COUNTY-FLORIDA

No. 5331981

RECEIVED FROM George A. Alvarez DATE 6 / 17 / 08

ADDRESS 9300 W. Flagler St. #101 MONTH DAY YEAR  
Miami STREET ADDRESS FL 33174 CASH \$  
CITY STATE ZIP CHECKS \$ 100.00

AMOUNT OF: One hundred DOLLARS, AND 00 CENTS TOTAL \$ 100.00

FOR PAYMENT OF: Qualifying Fee - Com. Council #10/101  
THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.  
DEPT.: Elections BY: Neva G. Suter

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

