

**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

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08 JUN -9 PM 12: 51
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer

Name of Candidate: Martin Luther Lampkin 1. Address (include post office box or street, city, state, zip code): 10235 S.W. 172 ST

Telephone (optional): () 2. Party (Partisan candidates only): 3. Office (add district, circuit, group number): Commissioner District 9

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

4. Name of Treasurer or Deputy Treasurer: Martin Luther Lampkin

5. Mailing Address (If post office box or drawer add street address): 10235 S.W. 172 ST 6. Telephone:

7. City: Miami 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: Bank Atlantic 12. Street Address: U.S. 1 and S.W. 136 ST

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

17. Signature of Candidate: X Martin Luther Lampkin Date: 6/9/2008

Campaign Treasurer's Acceptance of Appointment

I, Martin Luther Lampkin, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of Martin Luther Lampkin

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

Commissioner District 9

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.

6/9/2008

Date

X Martin Luther Lampkin

Signature of Campaign Treasurer or Deputy Treasurer



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

I, Martin Luther Lampkin, Candidate for the Office of Commissioner District 9, 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.

Martin Luther Lampkin
Signature of Candidate

6/11/2008
Date

305-232-8490
Day time Phone #

martinlampkin@syco600.com
E-mail address

Fax #

RECEIVED
 2008 JUN 11 PM 2:23
 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

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

MIAMI-DADE COUNTY LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

MIAMI-DADE COUNTY

(PLEASE PRINT)

I,

Martin	Luther	Lampkin
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, Martin Luther Lampkin
(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 Commissioner District 9
(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

Martin Luther Lampkin
Signature of Candidate

<u>10235 SW 172 ST</u> Current Address of Legal Residence	<u>(305) 232-8990 ()</u> Day Phone	<u>()</u> Fax Number
<u>()</u> Other Phone Number	<u>martinlampkin03@yahoo.com</u> Email Address	
<u>Miami</u> City	<u>FL</u> State	<u>33157</u> Zip Code
<u>6/11/2008</u> 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 11th day of June, 2008 by Martin Lampkin

[Signature]
Signature of Notary Public – State of Florida

NOTARY PUBLIC STATE OF FLORIDA
Maria Cristina Acosta
Commission # DD730644
Expires: FEB. 27, 2012
Print Name of Notary Public

- Personally known to me Identification provided

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

I, Martin Luther Lampkin

candidate for the office of Commissioner District 9

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

X Martin Luther Lampkin
Signature of Candidate

6/11/2008
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 87th Avenue
 Miami, FL 33172 (305) 499-8400

RECEIPT OF HANDBOOKS AND THE ELECTION LAW BOOK

Candidate:

Martin Luther Lampkin
 First Name Middle Name Last Name

Office: Commissioner District 9

This is to acknowledge my receipt of the following documents:

The Election Laws of the State of Florida as of ~~September 2007~~ 2008

- Hard Copy
- Downloaded from Internet

2008 Miami-Dade County Qualifying Handbook

- Hard Copy
- Downloaded form Internet

RECEIVED
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 MIAMI DADE COUNTY
 ELECTIONS DEPARTMENT

Received by: Martin Luther Lampkin
 Candidate Signature

Date: 6/11/2008

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

E-mail address: martinl Lampkin03@yahoo.com

