

RECEIVED

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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

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

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer

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

Angel Jayón

*525 De Soto Drive
MIAMI SPRINGS, FL 33166*

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

(305) 883-6565

School Board District 5

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

4. Name of Treasurer or Deputy Treasurer
Angel Jayón

5. Mailing Address (If post office box or drawer add street address) 6. Telephone
525 De Soto Drive *305 883-6565*

7. City 8. County 9. State 10. Zip Code
Miami Springs *Miami Dade* *Florida* *33166*

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

11. Name of Bank 12. Street Address
Bank of America *3025 N.W 87 AVE*

13. City 14. County 15. State 16. Zip Code
Doral *Miami Dade* *Florida* *33172*

17. Signature of Candidate Date
[Signature] *6/7/2008*

Campaign Treasurer's Acceptance of Appointment

I, *Angel Jayón*, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of *Angel Jayón*

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

School Board District 5

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.

6/7/2008
Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

OFFICE USE ONLY

STATEMENT OF CANDIDATE

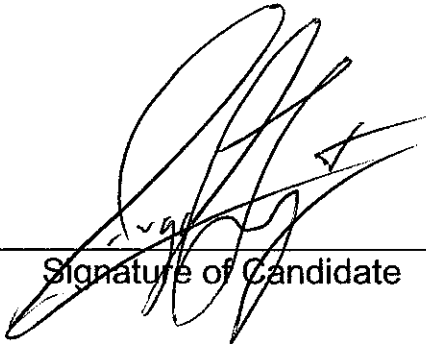
(Section 106.023, F.S.)

(Please Type)

I, Angel Jayon,
candidate for the office of School Board District 5;

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

X



Signature of Candidate

6/7/2008
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:

Angel Jayson
 First Name Middle Name Last Name

Office:

School Board Dist 5

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 by:

[Signature]
 Candidate Signature

Date:

June 20, 2008

Phone No.:

305-883-6565

Fax No.:

E-mail address:

**LOYALTY OATH FOR
NON-PARTISAN OFFICE**

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

_____, COUNTY

OFFICE USE ONLY

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2008 JUN 20 AM 10:18
MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

I, Angel Jayon
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, Angel Jayon
(PLEASE PRINT NAME AS YOU WISH IT TO BE WRITTEN IN ON THE BALLOT -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of School Board 5
(office) (district) (group)

My legal residence is 525 Miami Springs Fl 33166 County, Florida. I am qualified under the Constitution and the Laws of Florida 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.

X
[Signature] (305) 883-6565
Signature of Candidate Daytime Telephone Number Email Address

525 De Soto Drive Miami Springs Fl 33166
Address City State ZIP Code

Sworn to (or affirmed) and subscribed before me this 20th day of June, 2008.

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.



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 5331999

RECEIVED FROM Angel Zayon
ADDRESS 525 De Soto Drive
Miami Springs FL 33166
CITY STATE ZIP

DATE 6, 20, 08
MONTH DAY YEAR
CASH \$ _____
CHECKS \$ 1,635.48
TOTAL \$ 1,635.48

AMOUNT OF: One thousand six hundred thirty five and 48 cents
Qualifying Fee - School Board #5

FOR PAYMENT OF: Qualifying Fee - School Board #5
THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.
DEPT.: Electrons BY: Mena G. Sauter

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TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

Angel Zayon Campaign
525 De Soto Drive
Miami Springs FL 33166

DATE June 20, 2008

PAY TO THE ORDER OF Board of County Commissioners \$ 1,635.48
One thousand six hundred thirty five and 48/100 DOLLARS

FOR Qualifying School Board #5

Bank of America

(Handwritten signature)

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63-4630-R
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