

**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 17 PM 2:46
MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer

Name of Candidate NEHEMIAH DAVIS	1. Address (include post office box or street, city, state, zip code) 21401 S. W. 122 AVE - GOULDS, FL 33177
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Telephone (optional) (305) 238-3044	2. Party (Partisan candidates only)	3. Office (add district/circuit, group number) CC-14/144
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I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer
J L DEMPS

5. Mailing Address (If post office box or drawer add street address) 21401 S. W. 122 AVE	6. Telephone (305) 238-3044
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7. City PRINCETON	8. County MIAMI-DADE	9. State FL	10. Zip Code 33032
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I have designated the following named bank as my Primary Depository Secondary Depository

11. Name of Bank FIRST NAT'L BANK OF S. FLA	12. Street Address 9730 S. DIXIE HWY		
13. City MIAMI	14. County MIAMI-DADE	15. State FL	16. Zip Code 33157

17. Signature of Candidate X 	Date 6/17/2008
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Campaign Treasurer's Acceptance of Appointment

I, **J L DEMPS**, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of **NEHEMIAH DAVIS**

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

CC-14 / SUBAREA 144

**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.**

6/17/2008

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

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

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ELECTIONS

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Name of Candidate NEHEMIAH DAVIS	1. Address (include post office box or street, city, state, zip code) 21401 S. W 122 AVE - GOULDS, FL 33177
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Telephone (optional) (305) 238-3044	2. Party (Partisan candidates only)	3. Office (add district, circuit, group number) CC-14 / SUBAREA 144
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I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer
NEHEMIAH DAVIS

5. Mailing Address (If post office box or drawer add street address) 21401 S. W. 122 AVE	6. Telephone (305) 238-3044
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7. City GOULDS	8. County MIAMI-DADE	9. State FL	10. Zip Code 33177
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11. Name of Bank FIRST NAT'L BANK OF S. FLA	12. Street Address 9730 S. DIXIE HWY
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13. City MIAMI	14. County MIAMI-DADE	15. State FL	16. Zip Code 33157
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17. Signature of Candidate 	Date 7/21/2008
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Campaign Treasurer's Acceptance of Appointment

I, NEHEMIAH DAVIS, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of NEHEMIAH DAVIS


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

CC-14 / SUBAREA 144

**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.**

7/21/2008

Date


Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

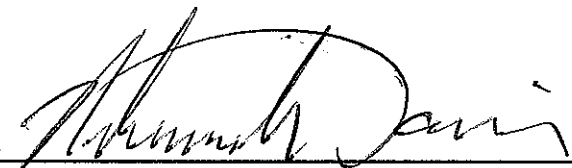
MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

2008 JUN 17 PM 2:47

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I, NEHEMIAH DAVIS
candidate for the office of COMMUNITY COUNCIL -14 / SUBAREA 14

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

X 
Signature of Candidate

6/17/2008
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:

NEHEMIAH

First Name

DAVIS

Middle Name

Last Name

Office: Community Council 14 - 144

This is to acknowledge my receipt of the following documents:

- The Election Laws of the State of Florida August 2006
- 2006 Candidate and Campaign Treasurer Handbook
- 2008 Miami-Dade County Qualifying Handbook

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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Received by:

Nehemiah Davis

Candidate Signature

Date:

6/17/2008

Phone No.:

(305) 238-3044

Fax No.:

786-293-0630

E-mail address:

NehemiahDavis37@aol.com



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

I, NEHEMIAH DAVIS, candidate for the office of CC-14/144, 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.

Nehemiah Davis
Signature of Candidate

6/17/2008
Date

Day Time Phone No.: (305) 238-3044

E-mail address: NehemiahDavis3@aol.com

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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>NEHEMIAH</u>	<u>DAVIS</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, NEHEMIAH DAVIS

(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** 14 **Subarea** 144

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 14 for at least six (6) months prior to qualifying.
- I have been a resident elector of the Subarea 144 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</u> <u>Neheemiah Davis</u>	<u>(305) 238-3044</u>	
Signature of Candidate	Daytime Telephone Number	Email Address

<u>21401 S.W. 122 Av</u>	<u>Goulds, FL</u>	<u>33177</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 17th day of June, 2008 by Neheemiah Davis

Personally Known: or
Produced Identification: _____

Type of Identification Produced:

E. Teresa Miller

Signature of Notary Public – State of Florida E. TERESA MILLER

Print, Type or Stamp Commissioned Name of Notary Public

BONDED THROUGH 1ST STATE INSURANCE

EXPIRES: MAR 12, 2010

MY COMMISSION #DD615501

E. TERESA MILLER

E. TERESA MILLER

MY COMMISSION #DD615501

EXPIRES: MAR 12, 2010

BONDED THROUGH 1ST STATE INSURANCE

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ELECTORICS DEPARTMENT
MIAMI-DADE COUNTY

EDM