

JUDICIAL OFFICE
CANDIDATE OATH

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2012 APR -9 PM 3:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 105.031, Florida Statutes)

ELECTIONS DEPARTMENT

I, Andrea R. Wolfson

(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 judicial office of County Court Judge, 11 (district #) 11 (circuit #)
24 (group #); my legal residence is Miami-Dade County, Florida; I am a qualified elector

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; 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 which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

x [Signature]
Signature of Candidate

(786) 218-9845
Telephone Number

andrearickewolfson@gmail.com
Email Address

3399 SW 3rd Avenue Miami FL 33145
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 109974105

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):
An-dree-a R. Wolf-son

STATE OF FLORIDA
COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 9th day of April, 2012.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

NOTARY PUBLIC-STATE OF FLORIDA
Janet Samper
Commission # DD942085
Expires: JAN. 28, 2014
BONDED THRU ATLANTIC BONDING CO., INC.

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

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DUNEDIN COUNTY
ELECTIONS DEPARTMENT

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Adding Deputy Treasurer

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Wolfson, Andrea R.

3. Address (include post office box or street, city, state, zip code)

3399 SW 3rd Avenue
Miami, FL 33145

4. Telephone

(786) 218-9845

5. E-mail address

andrearickerwolfson@gmail.com

6. Office sought (include district, circuit, group number)

County Court Judge - Group 24

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Jonah Wolfson

11. Mailing Address

3399 SW 3rd Avenue

12. Telephone

(305) 285-1115

13. City

Miami

14. County

Dade

15. State

FL

16. Zip Code

33145

17. E-mail address

jonahwolfson@wolfsonlawfirm.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Subudell United Bank

20. Address

1399 SW 1st Avenue

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

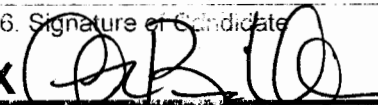
33130

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

April 9, 2012

26. Signature of Candidate

X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Jonah Wolfson (Please Print or Type Name), do hereby accept the appointment:

designated above as: Campaign Treasurer: Deputy Treasurer.

4-9-12 X

Date

Signature of Campaign Treasurer or Deputy Treasurer

Please print or type your name, mailing address, agency name, and position below:

FINANCIAL INTERESTS

LAST NAME — FIRST NAME — MIDDLE NAME:

Ricker Wolfson Andrea Dottie

MAILING ADDRESS:

Richard E. Gerstein Justice Building
1351 NW 12th Avenue, Suite 402

CITY:

Miami

ZIP:

33125

COUNTY:

Miami-Dade

NAME OF AGENCY:

State Courts

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

County Court Judge - Group 24

CHECK IF THIS IS A FILING BY A CANDIDATE

FOR OFFICE USE ONLY:

012 APR -9 PM 3:38

ELECTIONS DEPARTMENT

ID No.

Cor f. Code

P. Req. Code

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2011, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of April 9, 2012 was \$ 162,000

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effects (described above) is \$ 40,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)

VALUE OF ASSET

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
Triplex located at 836 W. 40th Street, Miami Beach, FL 33140	*800,000.00
Single-family home located at 8050 Noremac Avenue, Miami Beach, FL 33141	*500,000.00
2008 19-foot Cudacraft boat	*15,000.00
Stock (T. Rowe Price)	*35,000.00

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
U.S. Dept. of Education, P.O. Box 530260, Atlanta, GA 30353-0260	*106,000.00
Citibank Mortgage (836 W. 40th St. property) - P.O. Box 689196, Des Moines, IA 50368-9196	*530,000.00
KHESLC - P.O. Box 24328, Louisville, KY 40224	*30,000.00
Wells Fargo Home Loan - P.O. Box 660455, Dallas, TX 75266-0455	*345,000.00
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: Liabilities in excess of \$1,000, cont...	
NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Sabadell United Bank - 1399 SW 1st Avenue, Miami, FL 33130	*75,000.00
Wells Fargo Loan (836 W. 40th St. property) - P.O. Box 660455, Dallas, TX 75266-0455	*100,000.00

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2011 federal income tax return, including all W2's, schedules, and attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2011 federal income tax return and all W2's, schedules, and attachments. [If you check this box and attach a copy of your 2011 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME AND COUNTY	AMOUNT
Triplex located at 936 W. 40th Street, Miami Beach, FL 33140	836 W. 40th Street, Miami Beach, FL 33140	\$43,200.00
State Courts Salary	200 E. Gaines Street Tallahassee, FL 32399-0356	\$134,280.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5):

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 5]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

OATH

STATE OF FLORIDA
COUNTY OF Miami Dade

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

Sworn to (or affirmed) and subscribed before me this 9th day of

April 2012 by Andrey R Wolfson

Janet Scamper
(Signature of Notary Public, State of Florida)

Janet Scamper

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known

NOTARY PUBLIC-STATE OF FLORIDA
Provisional
Janet Scamper
Commission # DD942085
Expires: JAN. 28, 2014

Type of Identification Produced

BONDED THRU ATLANTIC BONDING CO., INC.

[Signature]
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 6741118

RECEIVED FROM Andrea Ricker Wolfson

DATE 4 / 9 / 12
MONTH DAY YEAR

ADDRESS 3399 SW 3rd Ave
STREET ADDRESS

CASH \$ _____

Miami CITY FL STATE 33145 ZIP

CHECKS \$ 5,371.20

AMOUNT OF: Five Thousand Three Hundred Seventy One DOLLARS, AND Twenty CENTS

TOTAL \$ 5,371.20

FOR PAYMENT OF: Election Filing Fee - Judge Group 24

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.



DEPT.: Elections

By: A V Innocent

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

<p>THE CAMPAIGN ACCOUNT OF ANDREA RICKER WOLFSON 3399 SW 3RD AVE MIAMI, FL 33145</p> <p>PAY TO THE ORDER OF <u>Board of County Commissioners</u></p> <p><u>Five thousand, three hundred, seventy-one & 20/100</u> DOLLARS</p> <p>Sabadell United Bank </p> <p>FOR <u>Qualifying Fee</u></p>	<p>1012</p> <p>DATE <u>4-5-12</u> 63-964-670</p> <p>\$ <u>5,371.20</u></p> <p> Security Features included. Details on Back.</p>
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