

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

11 AUG 25 PM 1:13

MIAMI-DADE 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):

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

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

Audrey M. Edmonson

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

1 SE 3RD AVE
21ST FLOOR
MIAMI FL 33131

4. Telephone

(305) 582-1980

5. E-mail address

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

County Commissioner, District 3

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

Darryl K. Shrapton

11. Mailing Address

1 SE 3RD AVE 21ST FLOOR

12. Telephone

(305) 374-1574

13. City

MIAMI

14. County

Dade

15. State

FL

16. Zip Code

33131

17. E-mail address

AKS@sbccpa.com

18. I have designated the following bank as my

Primary Depository

Secondary Depository

19. Name of Bank

SUNITrust

20. Address

1 SE 3RD AVE

21. City

MIAMI

22. County

Dade

23. State

FL

24. Zip Code

33131

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

8/17/11

26. Signature of Candidate

Audrey M. Edmonson

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

I, Darryl K. Shrapton, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

Campaign Treasurer

Deputy Treasurer

8/17/11
Date

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

I, Audrey M. Edmonson,
candidate for the office of County Commissioner, District 3;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Audrey M. Edmonson
Signature of Candidate

8/17/11
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).

**Receipt of Handbook and the
Election Laws of the State of Florida**



Candidate/Chairperson:

Audrey

Mass

Edmonson

First Name

Middle Name

Last Name

Miami Dade County Commissioner, District 3

Office Sought / Organization

This is to acknowledge my receipt of the following documents:

Handbooks Available	Edition	Downloaded from Internet	CD-Rom	Other
The Election Laws of the State of Florida		<input checked="" type="checkbox"/>	<input type="checkbox"/>	RECEIVED 2011 AUG 25 PM 2:13 MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	

Received by: _____

Audrey E Edmonson

Candidate/Chairperson Signature

Date: _____

8/25/11

Phone No.: _____

305-582-1980

Fax No.: _____

E-mail address: _____

