

**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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2011 OCT -7 AM 8:40

MIAMI-DADE
ELECTIONS

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)

ROBIN WILSON FABER

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

1351 NW 12 Street, #523
MIAMI, FL 33125

4. Telephone

(305) 548-5194

5. E-mail address

RFABER@JUD11.
FLCOURTS.ORG

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

COUNTY COURT JUDGE, GROUP 04
11th JUDICIAL CIRCUIT, MIAMI-DADE COUNTY

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

HECTOR LOMBANA, ESQ.

11. Mailing Address

2701 Ponce de Leon Blvd.

12. Telephone

(305) 448-4010

13. City

Coral Gables

14. County

Miami-Dade

15. State

FL

16. Zip Code

33134-6020

17. E-mail address

HJLE@GAMBALOMBANA.COM

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

19. Name of Bank

SUN TRUST

20. Address

777 Brickell Ave.

21. City

Miami

22. County

Miami-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

10/1/11

26. Signature of Candidate

X

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

I, HECTOR LOMBANA, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒

Campaign Treasurer

☐

Deputy Treasurer.

Date

Signature of Campaign Treasurer or Deputy Treasurer

**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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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)

ROBIN WILSON FABER

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

1351 NW 12 Street, #523
Miami, FL 33125

4. Telephone

(305) 548-5194

5. E-mail address

RFABER@JUD11-FLCOW2011-636

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

COUNTY COURT JUDGE, GROUP 04
11th JUDICIAL CIRCUIT, MIAMI-DADE COUNTY

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

CAROL S. FABER

11. Mailing Address

1 SE 3 Avenue, 25th Floor

12. Telephone

()

13. City

MIAMI

14. County

MIAMI-DADE

15. State

FL

16. Zip Code

33131

17. E-mail address

CAROL.FABER@AKERMAN.COM

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

19. Name of Bank

SUN TRUST

20. Address

777 Brickell Ave.

21. City

MIAMI

22. County

MIAMI-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

10/1/11

26. Signature of Candidate

X 

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

I, CAROL S. FABER, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☐

Campaign Treasurer

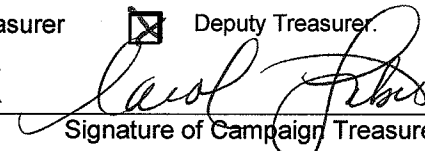
☒

Deputy Treasurer

10/5/11

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

(Section 105.031(5), F.S.)

(Please Type)

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MIAMI-DADE
ELECTIONS

I, ROBIN FABER

a judicial candidate, have received, read, and understand the requirements
of the Florida Code of Judicial Conduct.



(Signature of candidate)

10/1/2011

(Date)

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)


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MIAMI-DADE
ELECTIONS

I, ROBIN FABER,
candidate for the office of COUNTY COURT JUDGE - GROUP 04
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

10/1/2011

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:

ROBIN

First Name

WILSON

Middle Name

FABER

Last Name

COUNTY COURT JUDGE - GROUP 04

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"/>	
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:

Candidate/Chairperson Signature

Date:

10/1/2011

Phone No.:

305-548-5194

Fax No.:

305-548-5271

E-mail address:

RFABER@JUD11.FLCOURTS.ORG

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MIAMI-DADE
ELECTIONS

Campaign Treasurer's Report
Electronic Filing Requirements
for Miami-Dade County



☒ Candidate (office sought): COUNTY COURT JUDGE

☐ Political Committee: _____

☐ Party Executive Committee: _____

☐ Other: _____

I, ROBIN FABER
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.

A handwritten signature in black ink, appearing to read "Robin Faber".

Signature of Candidate or Chairperson

10/1/2011

Date

Day Time Telephone No: 305-548-5194

Email Address: RFABER@JUD11.FLCOURTS.ORG

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.