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

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

(PLEASE PRINT OR TYPE)

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

RECEIVED

11 OCT - 7 PM 12: 10

MIAMI-DADE COUNTY **ELECTIONS DEPARTMENT** 

OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES):  $\boxtimes$ Initial Filing of Form Re-filing to Change: Treasurer/Deputy ☐ Depository Office Party 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) code) Linda Singer Stein 2221 NE 164th St., #302 4. Telephone 5. E-mail address North Miami Beach, FL 33160 (305) 354-8773 steinlinda22@yahoo.com 6.Off ice sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: Miami-Dade County Court Judge, 11th Jud. Cir., My intent is to run as a Write-In candidate. Group 22 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 Partv candidate. 9.1 have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer Linda Singer Stein 11. Mailing Address 12. Telephone c/o Karen Jones, 6468 Manor Lane (305) 608-3737 15. State 13. City 14. County 16. Zip Code 17. E-mail address FL Miami-Dade South Miami 33143 karenjonesmiami@gmail.com 18. I have designated the following bank as my X Primary Depository Secondary Depository 19. Name of Bank 20. Address BNY Mellon 18841 NE 29th Ave. 21. City 22. County 23. State 24. Zip Code Aventura Miami-Dade FL 33180 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 26. Signature of Candidate October 1, 2011 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) Linda Singer Stein , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer. X October 1, 2011 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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11 OCT - 7 PM12: 10

MIAMI-DADE SUUNTY ELECTIONS DEPARTMENT

Rule 1S-2.0001, F.A.C.

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

DS-DE 9 (Rev. 10/10)

officer before opening the campaign account.	OFFICE USE ONLY			
1. CHECK APPROPRIATE BOX(ES):				
Initial Filing of Form Re-filing to Change: 🗍 🧵	reasurer/Deputy Depository Office Party			
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip			
Linda Singer Stein	2221 NE 164th St., #302			
4. Telephone 5. E-mail address	North Miami Beach, FL 33/60			
(305) 354-8773 Steinlinda 12@ yahe	oo.com			
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if			
Miani-Dade county Court Judge	applicable:  My intent is to run as a Write-In candidate.			
11th Jud. Circuit, Group 22				
8. If a candidate for a <u>partisan</u> 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				
Karen T. Jones	Company of the second of the s			
11. Mailing Address	12. Telephone			
6468 manor Lane	(305) 608-3787			
13. City 14. County 15. Sta				
South Miami Miami - Dade FL	33143 Karen jones miami@ 9 mail.com			
18. I have designated the following bank as my	Primary Depository Secondary Depository			
19. Name of Bank	20. Address			
BNY Mellon	18841 NE 29 - Ave.			
21. City 22. County	23. State 24. Zip Code			
Aventura Miami-Dade	FL 33180			
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 26. Signature of Candidate				
10/1/11 X Linde Senger Stain				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)				
I, do hereby accept the appointment				
(Please Print or Type Name)				
designated above as:   Campaign Treasurer  Deputy Treasurer.				
10/5/11	Mari T. Jon			
Date	Signature of Campaign Treasurer or Deputy Treasurer			

## STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

### OFFICE USE ONLY VED

11 OCT -7 PM 12: 10

MIAME GADE COUNTY ELECTIONS DEPARTMENT

I, Linda Singer Stein	f
candidate for the office of Miami-Dade County Court Judge Group 22;	,
have been provided access to read and understand the requirements of	
Chapter 106, Florida Statutes.	

X Signature of Candidate

October 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).

### STATEMENT OF CANDIDATE FOR JUDICIAL OFFICE

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

## OFFICE USE ONLY

11 OCT - 7 PM 12: 10

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

I, Lind	a Singer Stein	
a judicial candidate, have received,	read, and understand the requirements	
of the Florida Code of Judicial Conduct.		
	(Signature of candidate)	
	October 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.

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



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



☑ Candidate (office	e sought):	Linda Singer Stein	
•			
☐ Political Commi	пее:		
□ Party Executive	Committee:		
□ Other:			
			PM12:
1.	Linda Sing	ger Stein	<b>高</b>
	Linda Sing (Please print name of Cand	lidate or Chairperson)	and a
•	l copy of the Campaign Tre ty Elections Department v al signatures.	•	•
Lind	shiger Sten	Oct	ober 1, 2011
Signatui	re of Candidate or Chairper	son	Date
Day Time Telephor	ne No: 305-354-8773	·-····	
Email Address: _ste	einlinda22@yahoo.com		

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.

### **JUDICIAL OFFICE CANDIDATE OATH**

### RECEIVED 11 OCT -1 PM12: 10

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT OFFICE USE ONLY

### OATH OF CANDIDATE (Section 105.031, Florida Statutes)

I, Linda Sin		PPEAR ON THE BALLOT * NAME M.	AY NOT BE CHANGED AFTER TH	E END OF QUALIFYING)
am a candidate	for the judicial office of	County Court Judge	, <u>N/A</u> (district #)	, 11th ,
22 (group #)	_; my legal residence is	Miami-Dade		am a qualified elector
of the state and and the Laws o have qualified fo office I seek; ar	of Florida to hold the judic for no other public office in and I have resigned from	tion of the court to which I se cial office to which I desire to n the state, the term of which any office which I am requir on of the United States and th	be elected or in which office or any part thereof ed to resign pursuant to	I desire to be retained; I runs concurrent with the Section 99.012, Florida
of Florida and or of public funds	f the United States of Am	(only applicable if elected and value of the control of the contro	y or an officer of the cou	t system and a recipient
X Linds	Since Stein	(305)354-8773	steinlinda22@yah	oo.com
Signa	ature of Candidate	Telephone Number	Email Ad	dress
2221 NE 16	64th St., #302 N	orth Miami Beach	FL State	33160 ZIP Code
Candidate's Flor	rida Voter Registration N	umber (located on your voter int	formation card): /0908	7812
disabilities ( <i>see</i> i	instructions on page 2 of	ne below as you wish it to be this form): ger) Stein (rhymes with fi	•	ballot for persons with
STATE OF FLOCOUNTY OF $\sqrt{}$				
Sworn to (or aff	firmed) and subscribed	before me this da	y of October	, 20[\
Personally Known	or or		1 de	
Produced Identification	on:		Signature of Notary Public Print, Type, or Stamp Commis	signed Name of Notary Public
Type of Identification	Produced:		NOTARY PUBLIC-STATE O.  David J.  Commission # 1  Expires: AUG	FFLORIDA Kahn E <b>E019170</b>