

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(1) and 106.021(1), F.S.)

RECEIVED


2015 MAR 27 AM 11:29

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer


1. Committee or Organization People for Proven Leadership		2. Telephone (786) 740-9245	
3. Name of Treasurer or Deputy Treasurer Kavin Davis		4. Email (optional)	
		5. Telephone (optional) (786) 740-9245	
6. Mailing Address 18910 N.W. 9th Avenue, Miami Gardens, FL 33169			
7. Street Address Same as above			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank Bank of America		10. Street Address 18350 N.W. 2nd Avenue	
11. City Miami Gardens		12. State FL	13. Zip Code 33169
14. Signature of Chairman X 		15. Name of Chairman (Print or Type) Kavin Davis	

Campaign Treasurer's Acceptance of Appointment

I, **Kavin Davis**, do hereby accept the appointment as
(Please Print or Type)
 treasurer or deputy treasurer for **People for Proven Leadership**
(Committee or Organization)

**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.**

3/24/15
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

OFFICE USE ONLY

RECEIVED

2015 MAR 27 AM 11:30

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee
People for Proven Leadership PC

Telephone

786-740-9245

Mailing Address (include city, state and zip code)
18910 N.W. 9th Avenue, Miami Gardens, FL 33169

Street Address (include city, state and zip code)
Same as above

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or Connected Organization	Mailing Address	Relationship
None		

3. Area, Scope and Jurisdiction of the Committee

The goal of the committee is to improve the quality of life for residences of Miami-Dade County. This committee will collaborate with candidates and address issues that are important to Miami-Dade County residences.

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

Education

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Full Name	Mailing Address	Committee Title or Position
Kavin Davis	18910 N.W. 9th Avenue, Miami Gardens, FL 33169	Treasurer

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)

Full Name	Mailing Address	Committee Title or Position
Kavin Davis	18910 N.W. 9th Avenue, Miami Gardens, FL 33169	Chairman

RECEIVED

2015 MAR 27 AM 11:30

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)

Full Name	Mailing Address	Office Sought	Party
To be determined			

8. List Any Issues this Committee is Supporting: To be determined

List Any Issues this Committee is Opposing: To be determined

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party

N/A

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?

Residual funds will be directed to nonprofits

11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds

Name of Bank or Depository & Account Number	Mailing Address
Bank of America	18350 NW 2nd Avenue, Miami Gardens, FL 33169

12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
N/A			

STATE OF FL Miami-Dade COUNTY

I, Kavin Davis, certify that the information in this Statement of

Organization is complete, true and correct.

Kavin Davis
Signature of Chairman of Political Committee

3/24/15
Date

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

OFFICE USE ONLY

RECEIVED

2015 MAR 27 AM 11:30

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name Kavin Davis		Telephone 786-740-9245
Street Address 18910 N.W. 9th Avenue		
City Miami Gardens	State FL	Zip Code 33169
Mailing Address Same as above		
City	State	Zip Code

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

Kavin Davis

3/24/15

Signature of Registered Agent

Date

Former Registered Agent and Office Information (for changes only)

Name N/A		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization People for Proven Leadership		
Street Address 18910 N.W. 9th Avenue		Telephone 786-740-9245
City Miami Gardens	State FL	Zip Code 33169

Kavin Davis

Signature of Chairperson

Kavin Davis

3/24/15

Printed Name of Chairperson

Date



Access to Handbook and the Election Laws of the State of Florida

RECEIVED

MAR 27 AM 11:30

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Kavin

Davis

First Name

Middle Name

Last Name

People for Proven Leadership

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

- Candidate Qualifying Handbook (http://www.miamidade.gov/elections/candidate.asp)
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by: [Signature] Candidate / Chairperson Signature

Date: 3/24/15

Primary Telephone Number: 786-740-9245

Alternate Telephone Number:

E-mail address: pfpl2016@gmail.com

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

RECEIVED

- Candidate (office sought): _____
Candidate's Florida Voter Registration Number: _____
- Political Committee: people For proven Leadership _____
- Party Executive Committee: _____
- Other: _____

2015 MAR 27 AM 11:30

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

I, Kavin Davis
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies are no longer required.

I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade County, Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Absentee Ballot Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in absentee ballot activities.

Kavin Davis _____ 3/24/15 _____
Signature of Candidate or Chairperson Date

Day Time Telephone Number: 786-740-9245

Alternate Contact Number: _____

Email Address: PFPL2016@gmail.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.