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.

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2016 MAY 31 PM 3: 02

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the campaign account.	OFFICE USE ONLY			
1. CHECK APPROPRIATE BOX(ES):				
/	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 code)			
4. Telephone 5. E-mail address Common (a)	M19M, h 35135			
6. Office sought (include district, circuit, group number) (I ram Date Sount Leck of he Circuit and County Courts	7. If a candidate for a <u>nonpartisan</u> office, check if applicable: Yellow Yello			
8. If a candidate for a partisan office, check block and fil	I in name of party as applicable: My intent is to run as a			
Write-In	Party candidate.			
9. I have appointed the following person to act as my 🄀 Campaign Treasurer 🗀 Deputy Treasurer				
10)Name of Treasurer or Deputy Treasurer	9547931927			
11. Mailing Address 139名といい対サタル	12. Telephone ((6)) 037943			
13. City 14. County 15. St	ate 16, Zip Gode 17. E-mail address			
18. I have designated the following bank as my	Primary Depository Secondary Depository			
19. Name of Bank	20. Address 220 W. Atlante BIVA			
21 Gity Compassion County Some	23. State 24. Zip Gode			
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 5/3 / / / 6	26. Signature of Candidate			
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)				
I, (Please Print or Type Name)	, do hereby accept the appointment			
designated above as: Campaign Treasurer Deputy Treasurer.				
5.31 (X				
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.)

(PLEASE PRINT OR TYPE)

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2016 MAY 31 PM 3:01

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the campaign account.	OFFICE USE ONLY			
1. CHECK APPROPRIATE BOX(ES):				
	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			
AUBIN Young	code) 13985W 15t #806			
4. Telephone 5. E-mai address	Miami, F2 33135			
786)6037943 CommTrueyghas. Co	\sim			
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if			
Dade Cty Clerk of Court	applicable: My intent is to run as a Write-In candidate.			
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 AffiliationParty candidate.				
9. I have appointed the following person to act as my	Campaign Treasurer Deputy Treasurer			
10. Name of Treasurer or Deputy Treasurer				
11. Mailing Address 12. Telephone 786,637943				
13. City 14 County 15 State 16. Zip Code 17. E-mail address Comm VSC Jan 20, COM				
18. I have designated the following bank as my 🔀 Primary Depository 🔲 Secondary Depository				
19. Name of Bank QO 20. Address Atla to BIVO				
Pompano Boh J 22. County Ward	23. State 24. Zip Code 9			
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 AND THAT THE TRUE.				
25. Date	26. Signature of Candidate			
5.19.16	X			
27. Preasurer's Acceptance of Appointmen	it (fill in the blanks and check the appropriate block)			
I, Please Print or Type Name)	, do hereby accept the appointment			
designated above as: Campaign Treasurer Deputy Ireasurer.				
5.19.16 X				
Date Signature of Campaign Treasurer or Deputy Treasurer				

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Access to Handbook and the Election Laws of the State of Florida 2016 MAY 31 PM 3:09

MIAMI-DADE COUNTY

		ELECTIONS DEPARTMENT
Candidate/Chairperson:	-	
RyBIN		· () and
First Name	Middle Name	Last Name
Miam, Dock Conty	Iterk of the Cir Office Sought / Organizatio	cnit Cont
J '	Office Sought / Organizatio	n
l acknowledge that it is my requirements described in th County Elections Department V	ie following resources	d, understand and follow the available on the Miami-Dade
Contains information on Sta Florida, County Laws and H	te Laws and Handbooks, tl andbooks, Qualifying Infor	e.gov/elections/candidate.asp) ne Election Laws of the State of mation, Electronic Reporting Dates Recent Legislative Changes.
	te Laws and Handbooks, til andbooks, Electronic Repo	ne Election Laws of the State of orting Dates and Procedures,
. /	- Olemann-	
Acknowledged by:		
	Candidate / Chairperso	n Signature
Date: 53//6		
Primary Telephone Number:	78660379	43
Alternate Telephone Number:	95479319	7
E-mail address:	in ros CVM	Loo. Com
	*	`

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



A	<u> </u>
Candidate (office sought): Da do Chi Cerko	f Court
Candidate's Florida Voter Registration Number:	352511
Political Committee:	7337 102
Party Executive Committee:	MAY 3
Other:	EPAR
FUBIN JONES	3: 09
(Please print name of Candidate of Chairperson)	
Supervisor of Elections website by midnight of the day designate with Miami-Dade County requirements. I also acknowledge 12-21 of the Code of Miami-Dade County regarding the filing reports with the Supervisor of Elections were recently amendardcopies are no longer required.	that Sections 12-17 and g of the campaign finance
I also understand that, in accordance with Section 12-14.1 o County, Florida, candidates running for the Offices of Mi Commissioner, Property Appraiser, Clerk of the Circuit Court must now file the Absentee Ballot Campaign Report (MD-ED of paid campaign workers engaged in absentee ballot activities	ami-Dade County Mayor, s, and Community Council <u>26</u>) to disclose the names
Lastly, I understand that Section 2.69(e) of the Code of Michael Candidates for Property Appraiser also fill out the Miami Entity (MD-ED 19) form for every reporting period if contribution incorporated under the laws of the State of Florid foreign country of any partnership or any other legal entity other	i-Dade county Contributing utions are received from a a or any other state or any
	C 10 11
	5.19.16
Signature of Candidate or Chairperson	Date
Day Time Telephone Number: 706 60379	3
Alternate Contact Number: 9547931927	
Email Address: CommTvS@yaho.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.