

**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 JUN 17 AM 10:33
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT
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)

Enid Washington Demps

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

11025 SW 223 Street

Miami, FL 33170

4. Telephone

(786) 333-4137

5. E-mail address

enidwash@bellsouth.net

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

Community Council - Miami-Dade County
Subarea 152 Area 15

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

Enid Washington Demps

11. Mailing Address

11025 SW 223 Street

12. Telephone

(786) 333-4137

13. City

Miami

14. County

Miami-Dade

15. State

Florida

16. Zip Code

33170

17. E-mail address

enidwash@bellsouth.net

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

19. Name of Bank

Center State Bank

20. Address

25151 South Dixie Highway

21. City

Princeton

22. County

Miami-Dade

23. State

Florida

24. Zip Code

33032

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

June 10, 2016

26. Signature of Candidate

X Enid W. Demps

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

I, Enid W. Demps, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

June 10, 2016

Date

X Enid W. Demps
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, Enid Washington Demps,
MIAMI-DADE County Area Subarea
candidate for the office of Community Council 15/152 ;

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

X *Enid W. Demps*
Signature of Candidate

6/10/2016
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).



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

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Enid

Washington

Demps

First Name

Middle Name

Last Name

MIAMI-DADE COUNTY AREA

Community Council 15 Subarea 152

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: Enid W. Demps Candidate / Chairperson Signature

Date: 6/10/2016

Primary Telephone Number: 786-333-4137

Alternate Telephone Number: 305-254-0816

E-mail address: enidwash@bellsouth.net

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



Candidate (office sought): Miami-Dade County Area **Community Council 15** / Subarea 152

Candidate's Florida Voter Registration Number: 109075693

Political Committee: _____

Party Executive Committee: _____

Other: _____

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ELECTIONS DEPARTMENT

I, Enid Washington Demps
(Please print name of Candidate or Chairperson)

I 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.

Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that candidates for Property Appraiser also fill out the Miami-Dade county Contributing Entity ([MD-ED 19](#)) form for every reporting period if contributions are received from a corporation incorporated under the laws of the State of Florida or any other state or any foreign country of any partnership or any other legal entity other than a natural person.

Enid W. Demps

06/10/2016

Signature of Candidate or Chairperson

Date

Day Time Telephone Number: 786-333-4137

Alternate Contact Number: 305-254-0816

Email Address: enidwash@bellsouth.net

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.