

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

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

(PLEASE PRINT OR TYPE)

RECEIVED

2016 JUN 20 AM 10:08

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**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)

Marvin D. Wilson, Sr.

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

14321 SW 286 Street  
Homestead, FL 33033

**4. Telephone**

(786 ) 218-0897

**5. E-mail address**

marvindwilsonsr@gmail.com

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

Community Council Area 15, Sub Area 155

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**

Trina Askew

**11. Mailing Address**

14321 SW 286 Street

**12. Telephone**

( 786 ) 217-7794

**13. City**

Homestead

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33033

**17. E-mail address**

mgp305@hotmail.com

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

**19. Name of Bank**

Chase

**20. Address**

2495 NW 87th Avenue

**21. City**

Doral

**22. County**

Miami-Dade

**23. State**

Florida

**24. Zip Code**

33172

**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**

6/20/2016

**26. Signature of Candidate**



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

I, Trina Askew, do hereby accept the appointment

(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

6/20/2016

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)

**RECEIVED**  
2016 JUN 20 PM 2:05  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

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

*MARVIN D. WILSON, SR*      *14321 SW 286 STREET  
HOMESTEAD, FL 33033*

4. Telephone      5. E-mail address  
*(786) 218-0897*      *MARVINWILSONSR@YAHOO.COM*

6. Office sought (include district, circuit, group number)      7. If a candidate for a nonpartisan office, check if applicable:  
*COMMUNITY COUNCIL AREA 15, SUBAREA 155  
MIAMI, DADE COUNTY*       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  
*Trina Askew*

11. Mailing Address      12. Telephone  
*14321 SW 286 STREET*      *(786) 217-7794*

13. City      14. County      15. State      16. Zip Code      17. E-mail address  
*HOMESTEAD*      *MIAMI-DADE*      *FL*      *33033*      *trinaaskew@hotmail.com*

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

19. Name of Bank      20. Address  
*CenterState*      *28801 SW 157th Ave*

21. City      22. County      23. State      24. Zip Code  
*Homestead*      *miami-Dade*      *Florida*      *33033*

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  
*6/20/16*      *X [Signature]*

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

I, *Trina Askew*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.  
*06/20/2016*      *X Trina Askew*  
Date      Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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2016 JUN 20 AM 10:08

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

I, Marvin D. Wilson, Sr,

candidate for the office of MIAMI-DADE COUNTY SUB AREA  
155; **Community Council Area 15**;

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

X 

Signature of Candidate

6/20/2016

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

Candidate/Chairperson:

Marvin

Deon

Wilson, Sr.

First Name

Middle Name

Last Name

MIAMI DADE COUNTY

Community Council Area 15 SUB AREA 155

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) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by: [Signature] Candidate / Chairperson Signature

Date: 6/20/2016

Primary Telephone Number: 786-218-0897

Alternate Telephone Number: N/A

E-mail address: marvindwilsonsr@gmail.com

2016 JUN 20 AM 10:08 MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

RECEIVED

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



Candidate (office sought): MIAMI-DADE COUNTY AREA / SUB AREA  
COMMUNITY COUNCIL 15 / 155

Candidate's Florida Voter Registration Number: 109340375

Political Committee: \_\_\_\_\_

Party Executive Committee: \_\_\_\_\_

Other: \_\_\_\_\_

I, MARVIN D. WILSON, SR  
(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.

[Signature] \_\_\_\_\_ 6/20/16 \_\_\_\_\_

Signature of Candidate or Chairperson

Date

Day Time Telephone Number: 786-218-0897

Alternate Contact Number: N/A

Email Address: MARVINWILSON,SR@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.*

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