

**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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2018 JUN 15 PM 4:33

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)

Caroline Florence Williams

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

424 NW 101ST
MIAMI FL 33150

4. Telephone

(786) 7409702

5. E-mail address

iamthatiam97@gmail.com

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

Community Council Area 8 Sub area 82

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

Caroline Williams

11. Mailing Address

424 NW 101ST

12. Telephone

(786) 7409702

13. City

Miami

14. County

Dade

15. State

FL

16. Zip Code

33150

17. E-mail address

iamthatiam97@gmail.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Iberia Bank

20. Address

3275 NW 87 Ave

21. City

Doral

22. County

MIAMI DADE

23. State

FL

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

6-15-18

26. Signature of Candidate

X Caroline Williams

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

I, Caroline Williams, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6-15-18
Date

X Caroline Williams
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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ELECTIONS DEPARTMENT

I, Caroline Williams,
candidate for the office of Community Council Area 8 Subarea 82,

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

X Caroline Williams
Signature of Candidate

6-15-18
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:

Caroline Florence Williams
First Name Middle Name Last Name

community council 8 sub area 82
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: Caroline Williams
Candidate / Chairperson Signature

Date: 6-15-18

Primary Telephone Number: 786 740 9702

Alternate Telephone Number: 305 494-0166

E-mail address: iamthatiam97@gmail.com

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



Candidate (office sought): community council
SUB area 82 AREA 8
Candidate's Florida Voter Registration Number: 109793626

Political Committee: _____

Party Executive Committee: _____

Other: _____

I, Caroline Williams

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

(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 Vote by Mail Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, if applicable.

Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and 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 Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Political Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)4 organizations, if applicable.

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, if applicable.

Caroline Williams _____
Signature of Candidate or Chairperson Date 6-15-18

Day Time Telephone Number: 786 740 9702

Alternate Contact Number: 305 494 - 0166

Email Address: iamthatiam97@gmail.com

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