### 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

## RECEIVED

2020 APR 13 AM 10: 13

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

officer before opening the	e campa	ign account.							OFFICI	EUSE	ONLY
1. CHECK APPROPRIATE  Initial Filing of Form	•	<b>S):</b> -filing to Change:		reası	urer/[	Deputy [	] Deposi	tory	] Office		Party
Name of Candidate (in this order: First, Middle, Last)     Williams Alfred Armbrister Sr.				32	3. Address (include post office box or street, city, state, zip code) 3260 Thomas Avenue						
4. Telephone	5. E-ma	nail address			Miami, Florida 33133-5826						
(305 ) 205-6440	brother	arm120@yaho	oo.com	1							
6. <b>Office sought</b> (include district, circuit, group number) Miami-Dade County Mayor					7. If a candidate for a <u>nonpartisan</u> office, check if applicable:  My intent is to run as a Write-In candidate.						
8. If a candidate for a part	isan offi	ice, check block	and fill	in n	ame	of party as	applicabl	le: My in	tent is to ru	n as a	
Write-In No Party Affiliation Party candidate.											
9. I have appointed the fo	llowing	person to act as	my	$\times$	Can	npaign Trea	surer [	Depu	uty Treasure	er	
10. Name of Treasurer or Deputy Treasurer Williams Alfred Armbrister Sr.											
11. Mailing Address								12. Tele	ephone		
3260 Thomas Avenue								( 305	) 205-64	46	
13. City	14. C	County	15. Sta	ate		Zip Code		ail address			
Miami	Miam	ni-Dade	Florida	3	331	33	brothera	arm120@	စွဲyahoo.co	om	
18. I have designated the following bank as my					Primary Depository Secondary Depository						
19. Name of Bank				20.	Addr	ess					
21. City		22. County				23. State			24. Zip C	ode	
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.							R AND				
25. Date 26. Signature of Candidate											
April 13, 2020 X				X	X Wres, a armbrighte Dy.						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)											
I, Williams Alfred Armbrister Sr.					, do hereby accept the appointment						
(Please Print or Type Name)											
designated above as:											
April 13, 2020 X When, Che Chryster Dz.											
Date Signature of Campaign Treasurer or Deputy Treasurer											

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

# OFFICE USE ONLY RECEIVED 2020 APR 13 AM 10: 13 MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

I, Williams Alfred Armbrister Sr.				
candidate for the office of Miami-Dade County	Mayor ;			
have been provided access to read and understand the requirements of				
Chapter 106, Florida Statutes.				
X Way of Candidate	April 13, 2020 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



		LEGTION ADE CO
Candidate/Chairperson:		LECTIONS DEPARTMENT
Williams	Alfred	Armbrister Sr.
First Name	Middle Name	Last Name
Miami-Dade Cour		
	Office Sought / Organizat	tion
	n the following resource	ad, understand and follow thes available on the Miami-Dad
Contains information of Florida, County Laws a	n State Laws and Handbooks, nd Handbooks, Qualifying Info	ade.gov/elections/candidate.asp) the Election Laws of the State of ormation, Electronic Reporting Dates and Recent Legislative Changes.
Contains information or Florida, County Laws a		the Election Laws of the State of porting Dates and Procedures,
Acknowledged by: <u>Mar</u>	Candidate / Chairpers	son Signature
Primary Telephone Numl	ber: (305) 205-644	0
Alternate Telephone Nun	(305) 205-644	40
E-mail address: broth	erarm120@yaho	o.com

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



Candidate (office sought): Miami-Dade County Mayor	
Candidate's Florida Voter Registration Number: 109046208	
Political Committee:	2020
Party Executive Committee:	APPR
✓ Other:	NSA 2
I, Williams Alfred Armbrister Sr.	TITI
(Please print name of Candidate or Chairperson) understand that Campaign Treasurer's Reports <u>must</u> be filed electron Elections website by midnight of the day designated in order to comprequirements. I also acknowledge that Sections 12-17 and 12-21 of the regarding the filing of the campaign finance reports with the Supervisor amended in that original signed hardcopies are no longer required.	oly with Miami-Dade &ounty Code of Miami-Dade County
I also understand that, in accordance with Section 12-14.1 of the Conformal Florida, candidates running for the Offices of Miami-Dade County May Appraiser, Clerk of the Circuit Courts, and Community Council must Campaign Report (MD-ED 26) to disclose the names of paid campaign mail ballot activities, if applicable.	yor, Commissioner, Property t now file the Vote by Mail
Additionally, I understand that, in accordance with Sections 12-14.2 ar Miami-Dade County, Florida, Miami-Dade County Elected Officers and Offices of Miami-Dade County Mayor, Commissioner, Property Appraise and Community Council must now file the Reporting of Solicitation Committees, Electioneering Communications Organizations, 501(c)(4) Parties (MD-ED 28) to publicly disclose when they commence solic Committees, Electioneering Communications Organizations, Political organizations, if applicable.	Candidates running for the r, Clerk of the Circuit Courts, of Contributions for Political Organizations and Political itation activities for Political
Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade Coufor Property Appraiser also fill out the Miami-Dade county Contributing every reporting period if contributions are received from a corporation in the State of Florida or any other state or any foreign country of any parentity other than a natural person, if applicable.	Entity ( <u>MD-ED 19</u> ) form for corporated under the laws of
When a Combacter Dr.	April 13,202(
Signature of Candidate or Chairperson	Date
Day Time Telephone Number: (305)205-6440	
Alternate Contact Number: (305)205-6440	
Email Address: brotherarm120@yahoo.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.

### AFFIDAVIT OF UNDUE BURDEN

(Section 99.097(4), Florida Statutes)

IMPORTANT: (1) Paying signature gatherers will preclude or invalidate the filing of an undue burden oath. Section 99.097(6), Florida Statutes, provides: (a) If any person is paid to solicit signatures on a petition, an undue burden oath may not subsequently be filed in lieu of paying the fee to have signatures verified for that petition. (b) If an undue burden oath has been filed and payment is subsequently made to any person to solicit signatures on a petition, the undue burden oath is no longer valid and a fee for all signatures previously submitted to the supervisor of elections and any submitted thereafter shall be paid by the candidate, person, or organization that submitted the undue burden oath. If contributions as defined in s. 106.011 are received, any monetary contributions must first be used to reimburse the supervisor of elections for any signature verification fees that were not paid because of the filing of the undue burden oath. [Note: The second sentence in (b) applies only

when payment is (2) Upon a cand has surplus funds	idate terminating the campaig	fter an undue burden oath had been fi in, any candidate who qualified by the nds to the reimbursement of the signa	petition process and who
******	*********	*********	*******
I certify un	der oath that I intend	to qualify as a candidate for	or the office of
Miami-Dad	e County Mayor	an	nd that I am
without im		ation of petition signatures Irden on my personal re me.	
× John Or lle	ubrists Sr.	Williams Alfred Armb	Company Company Company (Company Company Compa
Signa	ture of Candidate	Print Candida	rr <sub>1</sub>
3260 Thoma	as Avenue	Miami	2020 MIA LEGI
Address		City	APR TO
Florida	33133-5826	(305 ) 2056440	13 AM
State	Zip	Telephone Number	35 5 77
State of Florida County of Miam	ni-Dade		w w
	irmed) and subscribed b	efore me this <u>13</u> day of .	April, 20_20
Personally Know	n: or	Chyfull	
Produced Identif	cation:	Signature of Notary Pub	
Type of Identifica	ation Produced:	Print, Type or Stamp Co Notary Public	mmissioned Name of
Fla.Dl#A651-88	1-51408-1	Elijah Perez-Puello NOTARY PUBLIC STATE OF FLORIDA	S-DE 19A (Rev. 6/1

Comm# GG247428