#### 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 JUN -9 AM 10: 57

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): Treasurer/Deputy Depository Office Party Initial Filing of Form Re-filing to Change: 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) code) 11110 SW 1965T Kelli Ann Thomas Apt A408 4. Telephone 5. E-mail address Miami, FL 33157 (305) 281-4869 | Kelli-ann Q att. net 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if Community Council, Sub Area 144 applicable: My intent is to run as a Write-In candidate. Area 14 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 candidate. Party No Party Affiliation Campaign Treasurer **Deputy Treasurer** 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer Angela Brown 11. Mailing Address 12. Telephone 14217 SW 160 CT (305) 510-2015 17. E-mail address 14. County 15. State 16. Zip Code 13. City 300ecatt.net Dade FL 33196 Miami Secondary Depository Primary Depository 18. I have designated the following bank as my 20. Address 19. Name of Bank Dade County Federal Credit Union

1. City 22. County 20295 S Dixie Hwy
23. State 24. Zip Code FL Miami Daole 33189 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. 26. Signature of Candidate 25. Date 06/09/2020 X Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. Angela Brown , do hereby accept the appointment (Please Print or Type Name) Deputy Treasurer. designated above as: Campaign Treasurer 06/09/2020 X Signature of Campaign Treasurer or Deputy Treasurer

**DS-DE 9 (Rev. 10/10)** 

Rule 1S-2.0001, F.A.C.

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Party Office 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) code) 11110 SW 196 ST Kelli Ann Thomas Apt A408 5. E-mail address Miami, FL 33157 (305) 281-4869 Kelli-ann@att.net 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) applicable: Community Council, Sub Area 144 My intent is to run as a Write-In candidate. Area 14 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 Party candidate. No Party Affiliation Deputy Treasurer Campaign Treasurer 9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer Kelli Ann Thomas 12. Telephone 11. Mailing Address | 1110 SW 196 ST APT A408 | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (305 ) | (3 (305) 281-4869 13. City 33157 | Kelli-ann@att.net Miami-Dade FL Miami □ Secondary Depository Primary Depository 18. I have designated the following bank as my 20. Address 20295 5 Dixie Hwy 19. Name of Bank Dade County Federal Credit Union | 22. County 24. Zip Code 23. State 33189 FL Dade 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. 26. Signature of Candidate 25. Date 06/09/2020 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. , do hereby accept the appointment Kelli Ann Thomas (Please Print or Type Name) Deputy Treasurer. Campaign Treasurer designated above as: X Signature of Campaign Treasurer or Deputy Treasurer

Rule 1S-2.0001, F.A.C. DS-DE 9 (Rev. 10/10)

## STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

#### **OFFICE USE ONLY**

RECEIVED

2020 JUN -9 AM 10: 57

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

I, Kelli Ann Thomas	,
candidate for the office ofCommu	nify Council, Sub Area 144;
have been provided access to read and under	stand the requirements of
Chapter 106, Florida Statutes.	
X District Condidate	06/09 / 2020 Date
Signature of Candidate	Dale

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 RECEIVED Election Laws of the State of Florida

2020 JUN -9 AM 10: 57

Candidate/Chairperson:		MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
Kelli	Ann	Thomas
First Name	Middle Name	Last Name
4	office Sought / Organization	Area 144
	Office Sought / Organization	ו
requirements described in County Elections Department	the following resources Website:	l, understand and follow the available on the Miami-Dade
Contains information on S Florida, County Laws and and Procedures, Importan	tate Laws and Handbooks, the Handbooks, Qualifying Information, and cook (http://www.miamidade.	e.gov/elections/candidate.asp) ne Election Laws of the State of mation, Electronic Reporting Dates Recent Legislative Changes.  gov/elections/pacs.asp)
Contains information on S	tate I aws and Handbooks, th	ne Election Laws of the State of orting Dates and Procedures,
Acknowledged by:	Candidate / Chairperso	on Signature
Date: 00/09/2020		
Primary Telephone Numbe	r: (305) 281-4	869
Alternate Telephone Numb	er: N/a	
E-mail address:	ann Catt.net	

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



	Candidate (office sought):
Γ	Political Committee:
Г	
L	Party Executive Committee:
L	Iother: I,Kelli Ann Thomas
	(Please print name of Candidate or Chairperson)  understand that Campaign Treasurer's Reports <u>must</u> 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.
	06/09/2020
	Signature of Candidate or Chairperson Date
	Day Time Telephone Number: (305) 281-4869
	Alternate Contact Number: (3cs) 251-1048
	Email Address: Kelli_ann@aH.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.