

RESET FORM

ACKNOWLEDGEMENT FOR CANDIDATES WITH THE OPTION TO OPEN A CAMPAIGN ACCOUNT



(Community Development District and South Dade Soil and Water Conservation District)

Robert William Fox

Name: _____ (Print name of Candidate)

11300 SW 231st Lane Miami , FL. 33170

Address: _____ (Include street, city, state, zip code)

Office Sought:

Caribe Palm CDD Soil #5

Community Development District: _____

South Dade Soil and Water Conservation – Group: _____

2022 JUN -2 AM 11:41
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

RECEIVED

Campaign Account:

I **AM** going to open a campaign account during my candidacy.

(Print name of Candidate)

understand that, before opening a campaign account, I am required to file all the requisite forms for this office with the Elections Department. I also understand that a Campaign Treasurer's Report must be filed electronically via the Supervisor of Elections website at www.miamidade.gov/elections/campaignreports by midnight on the day designated as per F.S. 106.0702(1) and in order to comply with Miami-Dade County requirements.

OR

I **AM NOT** going to open a campaign account during my candidacy.

Robert William Fox

I, _____
(Print name of Candidate)

will not be opening a campaign account. However, I understand that, in the event I choose to do so at a later date, I am required to file the requisite forms for this office with the Elections Department before opening the account. I also understand that a Campaign Treasurer's Report must be filed electronically via the Supervisor of Elections website at www.miamidade.gov/elections/campaignreports by midnight on the day designated as per F.S. 106.0702(1) and in order to comply with Miami-Dade County requirements.

Signature of Candidate

May 22 , 2022

Date



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

Candidate/Chairperson:

Robert

William

Fox

First Name

Middle Name

Last Name

Caribe Palm Community Development District

Office Sought / Organization

RECEIVED 2022 JUN -2 AM 10:41 MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

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

(<https://www.miamidade.gov/global/elections/candidate-qualifying-handbook.page>)

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

(<https://www.miamidade.gov/global/elections/political-committee-resources.page>)

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: _____

Candidate / Chairperson Signature

May 22 2022

Date: _____

7863853538

Primary Telephone Number: _____

7863853538

Alternate Telephone Number: _____

rfoxgroup@bellsouth.net

E-mail address: _____