

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

RECEIVED
10 JAN -6 PM 1:22
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Josaphat JOE Celestin

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

13500 NE 3ct suite 212
N. MIAMI FL 33161

4. Telephone (optional)

(786) 237-1504

5. E-mail address (optional)

JOE@JOECELESTIN.COM

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

MIAMI Dade County Com. dist-2

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

Sylvio DESTINVAL

11. Mailing Address (If post office box or drawer, also include street address)

13500 NE 3 CT suite 212

12. Telephone

(305) 401-0266

13. City

N. MIAMI

14. County

Dade

15. State

FL

16. Zip Code

33161

17. E-mail address (optional)

JOE@JOECELESTIN.COM

18. I have designated the following bank as my

Primary Depository

Secondary Depository

19. Name of Bank

Chase BANK

20. Street Address

5800 NW 7 AVE

21. City

MIAMI

22. County

Dade

23. State

FL

24. Zip Code

33150

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

01/06/10

26. Signature of Candidate

X 

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

I, Sylvio DESTINVAL, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

Campaign Treasurer

Deputy Treasurer.

01/06/10
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

STATE OF FLORIDA
 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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RECEIVED

10 JUN 14 AM 10:46

MIAMI DADE COUNTY
 ELECTIONS DEPARTMENT

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Josaphat JOE Celestin

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

13500 NE 3ct unit 212
 N. MIAMI FL 33161

4. Telephone (optional)

(786) 237-1504

5. E-mail address (optional)

JOE@JOECelestin.com

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

Miami Dade County Commission
 dist. 2

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

Josaphat JOE Celestin

11. Mailing Address (If post office box or drawer, also include street address)

13500 NE 3ct N Miami FL 33161

12. Telephone

(786) 237-1504

13. City

N. MIAMI

14. County

DADE

15. State

FL

16. Zip Code

33161

17. E-mail address (optional)

JOE@JOECelestin.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

CHASE BANK

20. Street Address

5800 NW 7 AVE

21. City

MIAMI

22. County

MIAMI DADE

23. State

FL

24. Zip Code

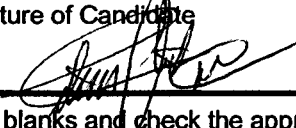
33142

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

06/14/2010

26. Signature of Candidate

X 

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

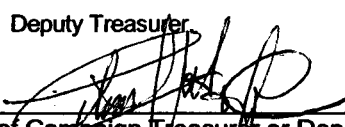
I, Josaphat JOE Celestin, do hereby accept the appointment
 (Please Print or Type Name)

designated above as:

Campaign Treasurer Deputy Treasurer

06/14/2010
 Date

X


 Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

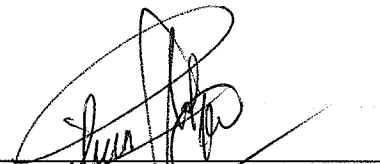
(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

I, Joseph + Joe Celestin,
candidate for the office of Miami Dade County Com. Dist-2
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X


Signature of Candidate

01/06/10
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).



Miami-Dade Supervisor of Elections
 2700 NW 87th Avenue
 Miami, FL 33172

(305) 499-8400

RECEIPT OF HANDBOOKS AND THE ELECTION LAW BOOK

MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

10 JAN -6 PM 1:22

RECEIVED

Candidate:

Josaphat JOE CELESTIN
 First Name Middle Name Last Name

Office: Miami Dade County Com. Dist-2

This is to acknowledge my receipt of the following documents:

The Election Laws of the State of Florida as of August 2008

- Downloaded from Internet
- CD Rom

Miami-Dade County Qualifying Handbook as of _____

- Downloaded from Internet
- CD Rom
- Other _____

Received by: _____
 Candidate Signature

Date: 01-06-10

Phone No.: 786-237-1504 Fax No.: 305-696-6050

E-mail address: JOE@JOECELESTIN.COM



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

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

10 JAN -6 PM 1:22

RECEIVED

I, Josaphat JOE Celestin, candidate for the office of County Com. Dist # 2, understand the Miami-Dade County policy regarding the submittal of Campaign Treasurer's Reports for Candidates who qualify with the Miami-Dade County Elections Department.

In order to comply with the requirement, I understand that Campaign Treasurer's Reports must be filed electronically. A hard copy must then be printed from the Miami-Dade County Elections website, contain original signatures, and be submitted by the reporting deadline.

[Handwritten Signature]
Signature of Candidate

01/06/10
Date

Day Time Phone No.: 786-237-1504
Email Address: JOE@JOECelestin.COM

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed.

LOYALTY OATH FOR MIAMI-DADE COUNTY COUNTY COMMISSIONER

(Sections 876.05-876.10, Florida Statutes)

RECEIVED

STATE OF FLORIDA Miami-Dade County

10 JUN 14 AM 10:46

| | | | |
|----|-----------------|---------------------|-----------------|
| I, | <i>Josaphat</i> | <i>JOE</i> | <i>CELESTIN</i> |
| | First Name | Middle Name/Initial | Last Name |

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, JOE CELESTIN

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT — NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of **Miami-Dade County Commissioner** District 2

I am a qualified elector of **Miami-Dade County**, Florida; I am qualified under the Constitution and the Laws of Florida and the Home Rule Charter of Miami-Dade County to hold the office to which I desire to be nominated or elected. I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes.

CANDIDATE CERTIFICATION

I, hereby, certify that I am a qualified elector of Miami-Dade County, and that I have been a resident elector of Miami-Dade County for at least three (3) years and resident of the District at least six (6) months prior to qualifying. I am submitting a copy of the following as proof of my residency in the district for the prescribed period:

- driver's license
- property tax receipt
- homestead exemption receipt
- utility bill
- lease agreement

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.

| | | | |
|----------|------------------------|--------------------------|-----------------|
| X | <i>[Signature]</i> | 786-237-1504 | JoeCelestin.com |
| | Signature of Candidate | Daytime Telephone Number | Email Address |

Address 13500 NE 3ct unit 212 City North Miami State FL Zip Code 33161

I, the candidate whose name appears above, do affirm that I meet the minimum residency requirements for this office and that the information provided on this form and any attachments hereto are true.

State of Florida,
County of Miami-Dade

Sworn to (or affirmed) and subscribed before me this 14th day of June, 2010 by
Josaphat Celestine

Personally Known: _____ or
Produced Identification:

Type of Identification Produced:
FL Drivers Lic

[Signature]

Signature of Notary Public – State of Florida
Print, Type or Stamp Commissioned Name of Notary Public

NOTARY PUBLIC-STATE OF FLORIDA
Maria Cristina Acosta
Commission #DD730644
Expires: FEB. 27, 2012
BONDED TRU ATLANTIC BONDING CO., INC.

PUBLIC FINANCING ACKNOWLEDGEMENT STATEMENT

(Miami-Dade Code Section 12-22)

(Please Type or use Blue Ink)

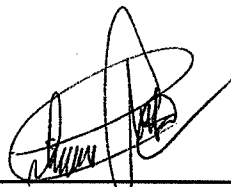
I, Josaphat - J. Celestin

Candidate for the Office of; County Commission Dist 2

have received, read, understand and agree to abide by Section 12-22 of the Miami-Dade County Code regarding the Election Campaign Financing Trust Fund.

RECEIVED
2010 MAR 12 PM 1:54
MIAMI DADE
ELECTIONS

X



Signature of Candidate

03/12/10
Date



MIAMI-DADE COUNTY
IRREVOCABLE STATEMENT
AND APPLICATION FOR ELECTION
CAMPAIGN FINANCING TRUST FUND

For Participation in
 Initial and Runoff Elections

(PLEASE TYPE OR USE BLUE INK)

| | | | |
|---|---|--|------------------------------------|
| 1. Name of Candidate (First Name, Middle Initial, Last Name) Josaphat - J. Celestin | | 2. Address (include post office box or street, city, state, zip code) 13500 NE 3ct suite 200 N. Miami FL 33161 | |
| 3. Telephone (optional) (706) 237-1504 | 4. E-mail address: JOE@JOE.CELESTIN.COM | 5. Fax: (305) 696-6050 | 7. (District number if applicable) |
| 6. Office <input type="checkbox"/> Miami-Dade County Mayor <input checked="" type="checkbox"/> Miami-Dade County Commissioner | | | |

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 MAR 20 11 51 AM '10
 CLERK OF COURTS

8. I am a qualified candidate pursuant to Chapter 99, Florida Statutes and Section 2.04 of the Miami-Dade Home Rule Charter. I acknowledge that I have read, understand and agree to comply with the requirements of Section 12-22 of the Code of Miami-Dade County. I have signed the Public Financing Acknowledgement Statement.

I desire to receive contributions from the Miami-Dade Election Campaign Financing Trust Fund.

a) I agree to abide by the expenditure limits provided Subsection (e)(1).

b) I agree to limit loans or contributions from my personal funds to \$25,000, which loans or contributions shall not qualify for meeting the threshold amounts in Subsection (d)(3).

c) I agree to submit to audits of the campaign account by the Commission on Ethics and Public Trust as provided in Subsection (f)(3).

d) As a candidate for County Commissioner receiving **Public Funds**, I agree to submit at least 300 but not over 360 separate contributions between \$100 and \$500 from different registered voters residing in Miami-Dade County or Businesses located in Miami-Dade County totaling at least \$30,000 as per Subsection (c)(5)a. At least 50% of the contributions are from my district (for the 2006 election cycle).

e) As a candidate for Mayor receiving **Public Funds**, I agree to submit at least 1,500 but not over 1,800 contributions between \$100 and \$500 dollars from different registered voters residing in Miami-Dade County or Businesses located in Miami-Dade County totaling at least \$150,000 as per Subsection (c)(5)b.

| | |
|--|-----------------------------|
| 9. Signature of Candidate <input checked="" type="checkbox"/> | 10. Date 03/12/10 |
|--|-----------------------------|

Request for Funds

Please choose **one** of the following options:

I hereby request to have my contribution from the Election Campaign Financing Trust Fund deposited by electronic funds transfer into the following account:

Name of Receiving Financial Institution: _____ **ABA #:** _____

Name of Beneficiary Account: _____ **Beneficiary Account #:** _____

Campaign Account of _____

I hereby request to have my contribution from the Election Campaign Financing Trust Fund in the form of a check made payable to:

Campaign Account of _____

Name of Candidate

03/12/10 _____ **X** _____ **Signature of Candidate**

Date



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 5997471

RECEIVED FROM Josephat Joe Celestin

DATE 6 / 14 / 10
MONTH DAY YEAR

ADDRESS 13500 NE 3CT, Ste. 212
STREET ADDRESS
North Miami, FL 33161
CITY STATE ZIP

CASH \$ _____
CHECKS \$ 360.00

AMOUNT OF: Three-hundred and Sixty DOLLARS, AND _____ CENTS TOTAL \$ 360.00

FOR PAYMENT OF: Qualifying Fee - For Commissioner - District 2

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.

DEPT.: Elections BY: Jaida Reyes

FOR OFFICE USE ONLY

| TRANS | SUBSIDIARY | INDEX CODE | SUBJECT | AMOUNT |
|-------|------------|------------|---------|--------|
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107.01-1 6/04

JOE CELESTIN FOR MIAMI DADE COUNTY 02-10 ⁶³⁻⁸⁴¹³44609 1123
COMMISSION DISTRICT #2
2670
13500 NE 3RD CT, APT. 212
NORTH MIAMI, FL 33161-3647

06/14/10
date

Pay to the order of Board of County Commissioners \$ 360.00
Three hundred and sixty dollars



for Qualifying fees

⑆ 267084 13 ⑆ 8533867201 ⑆ 1123