

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

2010 FEB -8 AM 10:55

MIAMI DADE
ELECTIONS

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

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

Eugene Flinn

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

7860 SW 157 Terrace
Palmetto Bay, FL 33157

4. Telephone (optional)

(305) 254 6587

5. E-mail address (optional)

eugene@eugeneflinn.com

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

Miami-Dade County Commission, District 8

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

McHenry Hamilton, CPA

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

9485 Sunset Drive, Suite A-280

12. Telephone

(305) 271-1480

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33173

17. E-mail address (optional)

mchcpa@bellsouth.net

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

METROBANK

20. Street Address

9350 South Dixie Highway

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

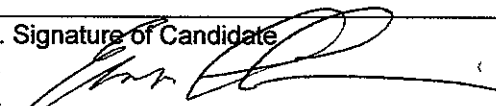
33156

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

February 8, 2010

26. Signature of Candidate



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

I, McHenry Hamilton, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

February 8, 2010

Date



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)

OFFICE USE ONLY

RECEIVED

2010 JUN -9 PM 12:10

MIAMI DADE
ELECTIONS

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

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

Eugene Flinn

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

7860 SW 157 Terrace
Palmetto Bay, FL 33157

4. Telephone (optional)

(305) 254-6587

5. E-mail address (optional)

eugene@eugeneflinn.com

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

Miami-Dade County Commission, District 8

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

Eugene Flinn

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

7860 SW 157 Terrace

12. Telephone

(305) 254-6587

13. City

Palmetto Bay

14. County

Miami-Dade

15. State

FL

16. Zip Code

33157

17. E-mail address (optional)

eugene@eugeneflinn.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

MetroBank

20. Street Address

9350 South Dixie Highway

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33156

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

June 9, 2010

26. Signature of Candidate

X 

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

I, EUGENE FLINN, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

Campaign Treasurer

Deputy Treasurer.

6/9/2010

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY
RECEIVED

2010 FEB -8 AM 10:55


MIAMI DADE
ELECTIONS

I, Eugene Flinn,

candidate for the office of Miami-Dade County Commission, District 8;

have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X


Signature of Candidate

February 8, 2010

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

Candidate:

EUGENE Philip FLINN
 First Name Middle Name Last Name

Office: Miami-Dade County Commissioner, District 8

This is to acknowledge my receipt of the following documents:

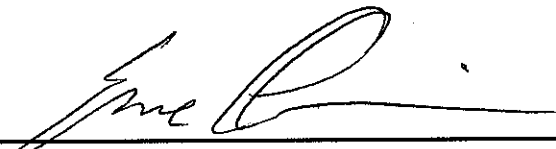
The Election Laws of the State of Florida as of August 2008

- Downloaded from Internet
- CD Rom

Miami-Dade County Qualifying Handbook as of _____

- Downloaded from Internet
- CD Rom
- Other _____

RECEIVED
 10 FEB - 8 AM 11:04
 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

Received by: 
 Candidate Signature

Date: 2/8/2010

Phone No.: 305 302 3713 **Fax No.:** _____

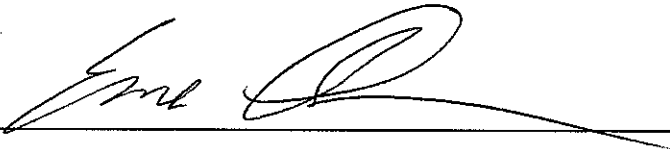
E-mail address: eugene@eugeneflinn.com



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

I, EUGENE FLINN, candidate for the office of MIAMI-DADE COUNTY COMMISSIONER, 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.



Signature of Candidate

2/8/2010

RECEIVED
10 FEB -8 AM 11:03
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Day Time Phone No.: 305 302 3713
Email Address: eugene@eugeneflinn.com
.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)

STATE OF FLORIDA Miami-Dade County

I,	<u>EUGENE</u>	<u>FLINN</u>	
	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, EUGENE FLINN

(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 _____

RECEIVED
 2010 JUN - 9 PM 12:00
 MIAMI-DADE COUNTY
 ELECTIONS

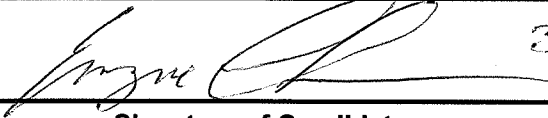
I am a qualified elector of **Miami-Dade County, Florida**; I am qualified under the Constitution and the Laws of Florida and the Home Rule Charter of Miami-Dade County to hold the office to which I desire to be nominated or elected. I have qualified for no other public office in the state, the term 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  305 254 6587 eugene@eugeneflinn.com

Signature of Candidate Daytime Telephone Number Email Address

Address 7800 SW 157 TER City Palmetto Bay State FL Zip Code 33107

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 9th day of June, 2010 by
Eugene Flinn.

Personally Known: _____ or
 Produced Identification: ✓


Type of Identification Produced:

FL Drivers Lic



Signature of Notary Public – State of Florida

Print, Type or Stamp Commissioned Name of Notary Public


Maria Cristina Acosta
 Commission # DD730644
 Expires: FEB. 27, 2012
 BONDED THRU ATLANTIC BONDING CO., INC.

