

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 FEB 11 AM 11:14

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)

Perla Tabares Hantman

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

P.O. Box 5412
Miami Lakes, FL 33014

4. Telephone (optional)

(305) 632-3322

5. E-mail address (optional)

District4victory@aol.com

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

Miami- Dade School Board District 4

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

Alina Vankatwyk

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

6957 Willow Lane

12. Telephone

(305) 216-4217

13. City

Miami Lakes

14. County

Miami- Dade

15. State

Florida

16. Zip Code

33014

17. E-mail address (optional)

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

19. Name of Bank

Wachovia Bank

20. Street Address

15615 NW 67th Avenue

21. City

Miami Lakes

22. County

Miami- Dade

23. State

Florida

24. Zip Code

33014

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 11, 2010

26. Signature of Candidate

X Perla Tabares Hantman

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

I, Alina Vankatwyk, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

Feb. 11, 2010

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
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10 AUG 17 PM 12:20

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)

Perla Tabares Hantman

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

P. O. Box 5412
Miami Lakes, FL 33014

4. Telephone (optional)

(305) 632-3322

5. E-mail address (optional)

District4victory@aol.com

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

Miami-Dade School Board District 4

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

Jason VanKatwyk

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

6957 Willow Lane

12. Telephone

(305) 815-4275

13. City

Miami Lakes

14. County

Miami-Dade

15. State

Florida

16. Zip Code

33014

17. E-mail address (optional)

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

Wachovia Bank

20. Street Address

15615 NW 67th Avenue

21. City

Miami Lakes

22. County

Miami-Dade

23. State

Florida

24. Zip Code

33014

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25. Date

8/12/10

26. Signature of Candidate

X Perla Tabares Hantman

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

I, Jason VanKatwyk, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer ☒ Deputy Treasurer.

8/12/10

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

I, Perla Tabares Hantman,
candidate for the office of Miami-Dade School Board, District #4;
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X

Perla Tabares Hantman

Signature of Candidate

February 9, 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

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

RECEIPT OF HANDBOOKS AND THE ELECTION LAW BOOK

Candidate:

Perla

Tabares

Hantman

First Name

Middle Name

Last Name

Office: Miami-Dade School Board District 4

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:

Perla Tabares Hantman

Candidate Signature

Date:

February 9, 2010

Phone No.:

305-632-3322

Fax No.:

305-884-8029

E-mail address:

District4victory@aol.com

**Campaign Treasurer's Report
Electronic Filing Requirements
for Miami-Dade County**



- ☒ Candidate (office sought): MIAMI-DADE SCHOOL BOARD DISTRICT 4
- ☐ Political Committee: _____
- ☐ Party Executive Committee: _____
- ☐ Other: _____

I, PERLA TABARES HANTMAN
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with the Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.

Perla Tabares Hantman
Signature of Candidate or Chairperson

JUNE 7, 2010

Date

Day Time Telephone No: (305) 632-3322

Email Address: DISTRICT4VICTORY@AOL.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.

LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

NON-PARTISAN OFFICE

STATE OF FLORIDA

COUNTY OF MIAMI-DADE**OFFICE USE ONLY**

RECEIVED

2010 JUN 14 PM 12:04

MIAMI DADE
ELECTIONS

I,

PERLA

TABARES

HANTMAN

First Name

Middle Name/Initial

Last Name

a citizen of the State of Florida and of the United States of America, and being [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.

Important: If elected, a candidate must retake the loyalty oath as specified in s. 876.05, Florida Statutes, and that oath shall be filed with the records of the governing official or employing governmental agency prior to the approval of payment of salary, expenses, or other compensation.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I,

PERLA TABARES HANTMAN

(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 non-partisan office of MIAMI-DADE SCHOOL BOARD, 4,
(office) (district)

MIAMI-DADE County, Florida;
(circuit) (group); I am a qualified elector of

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; by executing this form, I have taken the oath required by ss. 876.05-876.10, Florida Statutes; 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.

X

Perla Tabares Hantman

Signature of Candidate

(305) 632-3322

Telephone Number

District4victory@aol.com

Email Address

P.O. BOX 5412

Address

MIAMI LAKES

City

FL

State

33014

ZIP Code

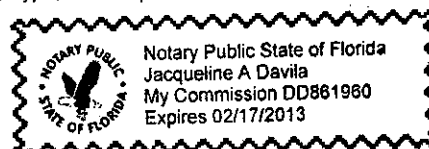
Sworn to (or affirmed) and subscribed before me this 14 day of JUNE, 20 10.

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced: _____

Jacqueline A Davila
Signature of Notary Public -- State of Florida
Print, Type, or Stamp Commissioned Name of Notary Public



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