

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

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2010 APR 29 PM 2:17

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)

ROBIN YOUNG

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

26410 SW 134th PL
 Miami, FL 33034

4. Telephone (optional)

(954) 548-1100

5. E-mail address (optional)

rbyoung2010@yahoo.com

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

Dade County Clerk of Circuit & County Courts

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 Democrat Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

ROY YOUNG

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

139 SW 21st Way

12. Telephone

954-549-8341

13. City

Fl. Land

14. County

Broward

15. State

FL

16. Zip Code

33319

17. E-mail address (optional)

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Wachovia

20. Street Address

7931 Gunn Hwy

21. City

Tampa

22. County

Hillsborough

23. State

FL

24. Zip Code

33620

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

4/29/10

26. Signature of Candidate

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

I, Robin Young, do hereby accept the appointment
 (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/29/10

Date

Signature of Campaign Treasurer or Deputy Treasurer

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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)

ROBIN YOUNG

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

26410 SW 134th Place
Miami, FL 33034

4. Telephone (optional)

954 1548-1100

5. E-mail address (optional)

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

Dade County Clerk of Circuit County Courts

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

Democratic

Party candidate.

9. I have appointed the following person to act as my

Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Paullette Wimberly

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

5614 Brookdale Way

12. Telephone

(813) 908-1547

13. City

Tampa

14. County

Hillsborough

15. State

FL

16. Zip Code

33625

17. E-mail address (optional)

gotVINC@yahoo.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Wachovia

20. Street Address

7931 GUNN HWY

21. City

Tampa

22. County

Hillsborough

23. State

FLORIDA

24. Zip Code

33626

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

April 14, 2010

26. Signature of Candidate

X

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

I, Paullette S. Wimberly, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

Campaign Treasurer Deputy Treasurer.

April 24, 2010

Date

X Paullette S. Wimberly
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

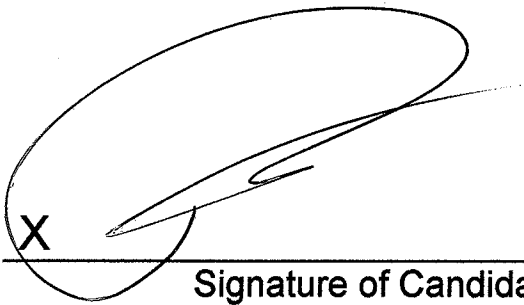
(Please Type)

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MIAMI DADE
ELECTIONS

I, Robin Young
candidate for the office of Dade County Clerk of Court;
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X 
Signature of Candidate

3-31-10
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).

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



- Candidate (office sought): Rubin Young, Clerk of Courts
- Political Committee: _____
- Party Executive Committee: _____
- Other: _____

I, Rubin Young
(Please print name of Candidate or Chairperson)

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MIAMI-DADE
ELECTIONS

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.

[Signature] _____ 4/29/10
Signature of Candidate or Chairperson Date

Day Time Telephone No: 954/5284100

Email Address: rubinYoung2012@yahoo.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.