

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 JUN 11 PM 3:15

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)

JOANNE CARBANA

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

4. Telephone (optional)

5. E-mail address (optional)

Kiwiteal@bellsouth.net

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

Community Council 5, Sub Area 51

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

CAESAR CARBANA

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

12. Telephone

13. City

14. County

15. State

16. Zip Code

17. E-mail address (optional)

Kiwiteal@gmail.com

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

19. Name of Bank

CHASE

20. Street Address

21. City

Deerfield Beach

22. County

Broward

23. State

FL

24. Zip Code

33441

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 10, 2010

26. Signature of Candidate

X Joanne Carbana

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

I, CAESAR CARBANA, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:    Campaign Treasurer    Deputy Treasurer.

June 10, 2010

Date

X Caesar Carbana

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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ELECTIONS DEPARTMENT

I, Joanne Carbana,

candidate for the office of Community Council 15, Sub Area 51;

have received, read and understand the requirements of Chapter 106,

Florida Statutes.

X Joanne Carbana  
Signature of Candidate

June 10, 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).

**Receipt of Handbook and the  
Election Laws of the State of Florida**



**Candidate/Chairperson:**

*Joanne*

*Carbana*

First Name

Middle Name

Last Name

*Community Council 5 Sub Area 51*

Office Sought / Organization

**This is to acknowledge my receipt of the following documents:**

Handbooks Available	Edition	Downloaded from Internet	CD-Rom	Other
The Election Laws of the State of Florida		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Committee Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Received by: \_\_\_\_\_

*Joanne Carbana*

Candidate/Chairperson Signature

Date: \_\_\_\_\_

*June 10, 2010*

Phone No.: \_\_\_\_\_

[Redacted]

Fax No.: \_\_\_\_\_

[Redacted]

E-mail address: \_\_\_\_\_

*Kiwi teal @ bellsouth.net*

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



Candidate (office sought): Community Council 5-Sub Area 51

Political Committee: \_\_\_\_\_

Party Executive Committee: \_\_\_\_\_

Other: \_\_\_\_\_

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ELECTIONS DEPARTMENT

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I, Joanne Carbana  
(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.

Joanne Carbana June 10, 2010  
Signature of Candidate or Chairperson Date

Day Time Telephone No: [REDACTED]

Email Address: Kiwitka1@bellsouth.net

*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 FOR MIAMI-DADE COUNTY  
COMMUNITY COUNCIL MEMBER**

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA Miami-Dade County

I, Joanne Carbana  
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, Joanne Carbana  
(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: **Community Council Member Area** 5 **Subarea** 51

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 Unincorporated Miami-Dade County

- I have been a Miami-Dade County resident elector for at least three years prior to qualifying.
- I have been a resident elector of the Council Area 5 for at least six (6) months prior to qualifying.
- I have been a resident elector of the Subarea 51 for at least three (3) 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.**

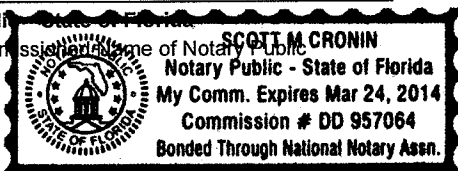
**X** Joanne Carbana [Redacted] Kiwiteale@bellsouth.net  
Signature of Candidate Daytime Telephone Number Email Address

[Redacted]  
Address City State Zip Code

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 10 day of June, 2010 by \_\_\_\_\_.

Personally Known:  or  
Produced Identification: \_\_\_\_\_  
Type of Identification Produced:  
\_\_\_\_\_

[Signature]  
Signature of Notary Public  
Print, Type or Stamp Commission of Notary Public  


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