

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



Candidate/Chairperson:

Monica Lynn ELLIOTT
First Name Middle Name Last Name

South Dade Venture Community Development Seat 3
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 type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	

RECEIVED
10 JUN 17 PM 2:13
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Received by: Monica L Elliott
Candidate/Chairperson Signature

Date: 6/6/10

Phone No.: 786-521-1322 Fax No.: _____

E-mail address: monicaelliott123@gmail.com

LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

NON-PARTISAN OFFICE

STATE OF FLORIDA

COUNTY OF Miami Dade

OFFICE USE ONLY

RECEIVED

10 JUN 17 PM 2:13

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

I,

Monica

First Name

Lynn

Middle Name/Initial

Elliott

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,

Monica Elliott

(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

South dade Venture CDD Board Supervisors

(office)

Seat 3

(district)

(circuit)

(group)

; I am a qualified elector of

Miami Dade

County, Florida;

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 Monica Elliott

Signature of Candidate

786 521-1322

Telephone Number

monicaelliott123@gmail.com

Email Address

2227 NE 41st Ave

Address

City

Homestead, FL

State

33033

ZIP Code

Sworn to (or affirmed) and subscribed before me this 16 day of June, 2016.

Personally Known: _____ or

Produced Identification: X

Type of Identification Produced:

FLORIDA DRIVER'S LICENSE

Signature of Notary Public - State of Florida

Print, Type, or Stamp Commissioned Name of Notary Public

NOTARY PUBLIC-STATE OF FLORIDA

Daphne E. Alfaro

Commission #DD732832

Expires: NOV. 07, 2011

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