

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

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MIAMI-DADE  
ELECTIONS

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

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

Larry King

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

c/o McHenry Hamilton  
9485 Sunset Drive, Suite A280  
Miami, FL 33173

4. Telephone

(305 ) 271-1480

5. E-mail address

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

County Court Judge Group 41

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

11. Mailing Address

9485 Sunset Drive, Suite A280

12. Telephone

( 305 ) 271-1480

13. City

Miami

14. County

Miami-Dade

15. State

FL

16. Zip Code

33173

17. E-mail address

mchcpa@bellsouth.net

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

19. Name of Bank

Sabadell United Bank

20. Address

9100 South Dadeland Boulevard

21. City

Miami

22. County

Miami-Dade

23. State

FL

24. Zip Code

33156-7846

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

*Feb. 23, 2011*

26. Signature of Candidate

*X [Signature]*

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.

*2/23/2011*  
Date

*X [Signature]*  
Signature of Campaign Treasurer or Deputy Treasurer

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**12. Telephone**

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**25. Date**

Feb. 23, 2011

**26. Signature of Candidate**

*Larry King*

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

I, Larry King, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer

Feb. 23, 2011

Date

*Larry King*  
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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ELECTIONS

I, Larry King ,  
candidate for the office of County Court Judge Group 41 ;

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

X   
Signature of Candidate

2/23/11  
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**

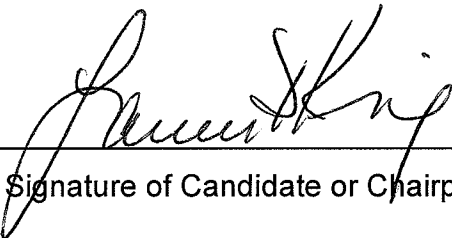


- Candidate (office sought): County Court Judge Group 41
- Political Committee: \_\_\_\_\_
- Party Executive Committee: \_\_\_\_\_
- Other: \_\_\_\_\_

I, Larry King  
(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.

 2/23/11  
Signature of Candidate or Chairperson Date

Day Time Telephone No: (305) 569-2506

Email Address: mchcpa@bellsouth.net

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