

**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.

RECEIVED
2015 FEB 20 11 9: 58
OFFICE OF THE
CLERK OF THE
COMMISSION

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)

Williams A. Armbrister

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

*3260 Thomas Ave.
Miami, Florida 33133*

4. Telephone

(305) 209-6440

5. E-mail address

brotherarm@comcast.net

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

City of Miami District 2 (Food) Commissioner

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

Marie Louise Armbrister Williams A. Armbrister

11. Mailing Address

3260 Thomas Avenue

12. Telephone

()

13. City

Miami

14. County

Dade

15. State

Florida

16. Zip Code

33133

17. E-mail address

*brotherarm@comcast.net
ELMARA@COMCAST.NET*

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

19. Name of Bank

Coconut Grove Bank

20. Address

2701 South Bayshore Drive

21. City

Miami

22. County

Dade

23. State

Florida

24. Zip Code

33133

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. 20, 2015

26. Signature of Candidate

X Williams A. Armbrister

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

I, *Williams A. Armbrister*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

Feb. 20, 2015
Date

X Williams A. Armbrister
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

I, Williams A. Armbrister,

candidate for the office of City of Miami District 2 Commissioner;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

FILED
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CITY OF MIAMI

X Williams A. Armbrister
Signature of Candidate

Feb. 20, 2015
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).