

**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  
11 MAR -2 AM 11:37  
PRISCILLA A. THOMPSON  
CITY CLERK  
CITY OF MIAMI, FL

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 Alfred Armbrister

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

3260 Thomas Avenue Miami, Florida 33133  
P.O.Box 330025 Miami Florida 33233

**4. Telephone**

(786 ) 473-5551

**5. E-mail address**

brotherarm@comcast.net

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

Commissioner District 2

**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    WAA Party candidate.

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

**10. Name of Treasurer or Deputy Treasurer**

Mamie L. Armbrister

**11. Mailing Address**

3260 Thomas Avenue

**12. Telephone**

( 305 ) 632-4691

**13. City**

Miami

**14. County**

Dade

**15. State**

Florida

**16. Zip Code**

33133

**17. E-mail address**

eimam@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**

February 28, 2011

**26. Signature of Candidate**

*Mamie L. Armbrister*

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

I, Mamie L. Armbrister, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

February 28, 2011

Date

*Mamie L. Armbrister*

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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PRISCILLA A. THOMPSON  
CITY CLERK  
CITY OF MIAMI, FL

I, Williams Alfred Armbrister,

candidate for the office of Commissioner District 2;

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

Florida Statutes.

X Williams Alfred Armbrister  
Signature of Candidate

02-28-2011  
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).

