

**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**

RECEIVED  
 2009 DEC -3 PM 3:58  
 PRISCILLA L. THOMPSON  
 CLERK OF COURTS

**1. CHECK APPROPRIATE BOX:**

Original Appointment      Change in:    Treasurer/Deputy    Depository    Office    Party

**2. Name of Candidate** (in this order: First, Middle, Last)  
**Dufirstson Julio Neree**

**3. Address** (include post office box or street, city, state, zip code)  
 166 NE 54 Street  
 Miami, FL 33137

**4. Telephone** (optional)  
 (305) 758-8080

**5. E-mail address** (optional)  
 info@goneree.com

**6. Office sought** (include district, circuit, group number)  
 City of Miami Commissioner (District 5)

**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    Nonpartisan office \_\_\_\_\_ Party candidate.

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

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

**11. Mailing Address** (If post office box or drawer, also include street address)  
**166 NE 54 Street**

**12. Telephone**  
 (305) 758-8080

**13. City**  
 Miami

**14. County**  
 Miami-Dade

**15. State**  
 FL

**16. Zip Code**  
 33137

**17. E-mail address** (optional)  
 info@goneree.com

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

**19. Name of Bank**  
**Peoples Credit Union**

**20. Street Address**  
**6201 NE 2 Avenue**

**21. City**  
 Miami

**22. County**  
 Miami-Dade

**23. State**  
 FL

**24. Zip Code**  
 33138

**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**  
**December 2, 2009**

**26. Signature of Candidate**  
 X *[Handwritten Signature]*

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
 I, MERUS BENOIT, do hereby accept the appointment  
 (Please Print or Type Name)

designated above as:    Campaign Treasurer    Deputy Treasurer.  
 \_\_\_\_\_  
 12/3/09      X *[Handwritten Signature]*  
 Date      Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

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PRISCILLA L. THOMPSON

CITY CLERK

I, Dufirstson Julio Neree,

candidate for the office of City of Miami Commissioner, District 5;

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

X

*Dufirstson*

Signature of Candidate

December 2, 2009

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).

AFFIDAVIT OF CANDIDATE

CITY OF MIAMI, FLORIDA

COUNTY OF MIAMI-DADE )
CITY OF MIAMI )

Dufirstson Neree

(hereinafter "affiant"),

being first duly sworn, deposes and says:

1. My name is Dufirstson Neree

2. For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below. Those candidates seeking the office of Commissioner please check and fill in the blank in subsection (b) below:

(a) I am offering myself as a candidate for the office of Mayor of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of Miami for the duration of my term of office.

X (b) I am offering myself as a candidate of the office of Commissioner in District Number 5 of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the district for the duration of my term of office.

3. I have resided in the City of Miami for a minimum of one year before qualifying if applying for Mayor, and one year in the district if applying for the Commission, and I am a registered voter and a duly qualified elector of the City of Miami, Florida, presently registered to vote in precinct No. 517.

I presently reside at the following address (must include zip code):

166 NE 54 Street, Miami, FL 33137

which is my legal address, and I have resided continually at said address from the 15 day of August 2007, to the present.

4. Immediately prior to residing at the above-stated address, I have resided at the hereinbelow listed addresses for the cited periods of time:

(List hereinbelow all addresses at which you have resided for the past five years, as well as the length of time at each address):

Table with 2 columns: Prior Addresses, For the Period. Rows include 3470 East Coast Ave (2 years) and 400 NW 52 Street (2 years).

5. In addition to the residence that I have listed as my present address, I also reside at the following listed addresses on a temporary basis as a secondary domicile or domiciles:

506 Buchanan Street, NW, Washington, DC 20011

6. Affiant's spouse resides at the following address: (must include city, state and zip code)

N/A

7. Affiant's minor children reside at the following address: (must include city, state and zip code)

N/A

8. At the present time, affiant (is) (is not) registered to vote in any city, county or state other than as stipulated in subparagraph 3 above.

9. Name and business address of affiant's employer:

Howard University

2400 6th Street, NW Washington, DC 20059

10. Affiant's occupation: Economist

11. Affiant has been employed in the above-cited capacity for the following period of time: 2 years

(Note: In the event the occupation of affiant has been for a period of less than one year, or the employment period with the same employer has been for a period of less than one year, affiant shall give the name(s) and address(es) of his/her employer(s) and occupation(s) for the period of one year prior to the date of this affidavit).

N/A

12. Affiant represents that he/she (is) (is not) currently holding another elective or appointive office, whether city, county or municipal - the term of which or any part thereof runs concurrently with that of the office he/she seeks, and that he/she has resigned from any office from which he/she is required to resign pursuant to F.S.99.012 and/or the City of Miami Charter.

13. Affiant represents that, as of this date, he/she (is) (is not) seeking to qualify for a public office which is currently held by an officer who has authority to appoint, employ, promote, or otherwise supervise him/her and who has qualified as a candidate for reelection to that office.

(Note: If affiant is an employee of the City of Miami (other than city manager, city attorney, independent auditor general or city clerk) or member of a city board of the City of Miami. Florida (other than a city commissioner or mayor), affiant in the case of an employee shall take a leave of absence, without pay from his/her employment during the period in which affiant is seeking election to public office or in the case of a board member such member shall resign and such leave of absence or resignation to be effective upon which ever occurs first:

- (a) such employee or board member receives contributions or makes expenditures, or gives her or his consent for any other person to receive contributions or make expenditures. with a view to bringing about his or her nomination or election to public office; or
- (b) at the time such employee or board member appoints a campaign treasurer and designates a primary depository; or

REC-3113

ATTACHMENT A

(c) at the time such employee or board member files qualification papers and subscribes to a candidate's oath as required by law.

The definition of "city board" is found in Section 2-882 of the Miami City Code.

14. Affiant's campaign headquarters address and telephone number:

166 NE 54 Street, Miami, FL 33137

Affiant's campaign treasurer's name:  
Merus Benoit

\*Affiant's campaign treasurer's address:  
5722 N Miami Avenue, Miami, FL 33137

Telephone numbers: (work) 305-758-8080  
(home) 786-273-2430

\*[A Campaign Treasurer or Deputy Treasurer shall be a registered voter in the State of Florida.]

15. Affiant represents that, if elected, (he/she) shall serve in the elective office to which (he/she) seeks election.

16. Following is the exact way in which affiant would like to have his/her name printed on the official ballot:

Dufirstson Neree *DM*

SIGNED THIS 3<sup>rd</sup> DAY OF December, 2009.

*Neree*

AFFIANT

BEFORE ME, the undersigned authority, personally appeared Dufirstson Neree, who, after first being duly sworn, deposes and states that he executed the foregoing to the best of his knowledge and belief.

*[Signature]*  
CITY CLERK,  
CITY OF MIAMI, FLORIDA

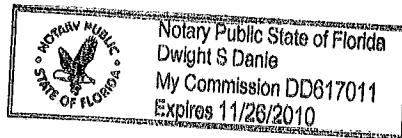
for

(SEAL)

\_\_\_\_\_ Did take an oath

Produced identification

Type of identification produced: Driver's License N600-160-74-285-0



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MAY 11 2010



**PART D — INTANGIBLE PERSONAL PROPERTY** [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Stock	TD Waterhouse

**PART E — LIABILITIES** [Major debts]  
NAME OF CREDITOR

ADDRESS OF CREDITOR

Direct Loans	South Dakota
Citibank, NA	New York

**PART F — INTERESTS IN SPECIFIED BUSINESSES** [Ownership or positions in certain types of businesses]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A	N/A	N/A
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required):

*D. Free*

DATE SIGNED (required):

12/2/09

**FILING INSTRUCTIONS:**

**WHAT TO FILE:**

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

**NOTE:**

**MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

**WHERE TO FILE:**

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

**Local officers/employees** file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

**State officers or specified state employees** file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

**WHEN TO FILE:**

**Initially**, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

**Candidates** for publicly-elected local office must file at the same time they file their qualifying papers.

**Thereafter**, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

**Finally**, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

**LOYALTY OATH**

(Sections 876.05-876.10, Florida Statutes)

**NON-PARTISAN OFFICE**

STATE OF FLORIDA

COUNTY OF Miami-Dade

**OFFICE USE ONLY**

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FRISCI SIMMONSON

CL FL

I,

**Dufirstson**                      **Julio**                      **Neree**

First Name

Middle Name/Initial

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,

Dufirstson Neree <sup>SM.</sup>

(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 City of Miami Commissioner, 5,  
(office) (district)

---, ---; I am a qualified elector of Miami-Dade County, Florida;  
(circuit) (group)

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** Neree (305) 758-8080 info@goneree.com  
Signature of Candidate Telephone Number Email Address

166 NE 54 Street Miami FL 33137  
Address City State ZIP Code

Sworn to (or affirmed) and subscribed before me this 3 day of Dec., 2009

Personally Known:  or

Produced Identification: \_\_\_\_\_

Type of Identification Produced:  
\_\_\_\_\_

[Signature]  
Signature of Notary Public - State of Florida  
Print, Type, or Stamp Commissioned Name of Notary Public

NOTARY PUBLIC-STATE OF FLORIDA  
**Fritz Sajous**  
Commission #DD867682  
Expires: APR. 23, 2013  
BONDED THRU ATLANTIC BONDING CO., INC.

LOYALTY OATH

RECEIVED

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF MIAMI)
(Please Print)

2009 DEC -3 PM 3:59

PRISON ... JOHNSON

I, Dufirstson J. Neree
First Name Middle 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.

[Signature]
Signature of Candidate

OATH OF CANDIDATE

OFFICE OF CITY OF MIAMI COMMISSIONER

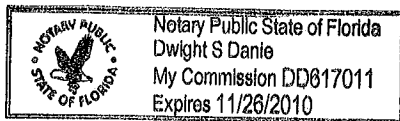
Before me, an officer authorized to administer oaths, personally appeared

Dufirstson NEREEN

(Please print name as you wish it to appear on ballot)

who being sworn, says, she is a candidate for the office of City of Miami Commissioner, District 5; that she is a qualified elector of the City of Miami, Florida; that she is qualified under the Constitution, the Laws of Florida, and City of Miami Charter to hold the office to which she desires to be elected; that she has taken the oath required by ss. 876.05 - 876.10, Florida Statutes; that she has qualified for no other public office in the State, the term of which office or any part thereof runs concurrent with that of the office she seeks; and that she has resigned or taken a leave of absence from any office from which she is required to resign or take a leave of absence, pursuant to Section 99.012, Florida Statutes.

[Signature]
Signature of Candidate



166 NE 54 Street
Miami, FL 33137
Address
City State ZIP Code

The Loyalty Oath and the above Oath of Candidate are sworn to

and subscribe before me this 3rd day of December, 2009.

(Signature of Officer Administering the Oath, or of designated Notary Public - State of Florida) [Signature]

Print, Type, or Stamp Commissioned Name of designated Notary Public) Dwight Danie

Personally Known OR Produced Identification Type of Identification Produced Drivers License NC600-160-74-285-0



Elections  
2700 NW 87th Avenue  
Miami, Florida 33172  
T 305-499-VOTE F 305-499-8547  
TTY: 305-499-8480

miamidade.gov

Date 12/03/2009  
Time 10:21:50 AM

**Lester Sola**  
Supervisor of Elections  
Voter Registration Receipt

Miami-Dade County, FL

Regn Number / Número de Registración  
Voter Name / Nombre de Votante  
Residence / Residencia

**110316721**  
**Neree, Dufirstson**  
**166 NE 54Th ST**  
**Miami FL 33137**

Mailing Address / Dirección de Correo

**none**

Voter Status / Estado del Votante  
Birth Date / Fecha de Nacimiento  
Birth Place / Lugar del Nacimiento  
Sex / Sexo  
Race / Raza  
Party / Partido  
Precinct / Precinto

**1(A) Active Voter**  
**Aug/05/1974**  
**HAITI**  
**M**  
**3**  
**REP**  
**517**  
**Jerusalem French S.D.A. Church**  
**4201 NE 2 Ave**  
**Jerusalem French S.D.A. Church**

Registration Date / Fecha de Registración  
Assistance Required / Asistencia Requerida

**Apr/18/2005**  
**N**

*Witness my hand and official seal at Miami-Dade County, FL,  
Firmo de mi puño y letra y estampo el sello oficial del Condado de Miami-Dade County, FL,  
on Dec/03/2009 / este día Dec/03/2009*

**Lester Sola**  
Supervisor of Elections  
Miami-Dade County, FL

By: Michelle Sotera

2009 DEC -3 PM 3:59  
RISCHIE  
DUFIRSTSON


December 3, 2009

City of Miami  
Office of the City Clerk  
Priscilla A. Thompson, CMC  
3500 Pan American Drive  
Miami, FL 33133

Dear Ms. Thompson:

I, Dufirstson Neree, candidate for City of Miami Commissioner District 5, do hereby swear that I reside at 166 NE 54 Street, Miami, FL 33137, and I have resided at this address for well over the 1 year qualifying requirement for residency in the District.

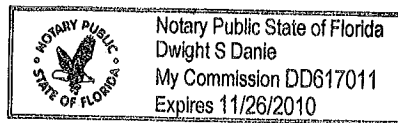
Sincerely,



Dufirstson Neree

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PRISCILLA A. THOMPSON  
CITY CLERK  
CITY OF MIAMI

Subscribed and sworn before me, this 3<sup>rd</sup> day of December, 2009, a Notary Public in and for Miami-Dade County, State of Florida.

  
Notary Public

My commission expires Nov 11, 2010.

STIN ARPS PROPERTY SYSTEM - STREET INQUIRY (13)

STREET ID: 079750 IN USE: YES

--HOUSE RANGE-- QUAD NAME TYPE --SIDE--  
0150 - 0198 NE 54 ST 0 EVEN

FACE: N PRIMARY ZONE: EMPOWERMENT ZONE: N  
ZIP CODE: 331372416 SD1 ZONE: LATIN QUATERS: N  
CENSUS TRACT: 2201 SD2 ZONE: VOTING DISTRICT: 05  
CENSUS BLOCK: 1002 DDRI ZONE: N  
FIRE 901 ZONE: 1171 SEOPWDRI ZONE: N  
FIRE SFBC ZONE: 2A HIST PRESVN DIST: N  
NBHD CODE: 02 SCENIC CORRIDOR: N  
SUB NBHD CODE: 02 PEDESTRIAN PATHWAY: N  
SOLID WASTE ROUTE: 109 OMNI TAX DISTRICT: N  
TRASH ROUTE: 00 DDA DISTRICT: N  
STREET CLEAN ROUTE: 000 CD TARGET AREA: 01

NEXT STREET:

HOUSE NO: QUAD: NAME: TYPE:  
ACTION: 1-CONTINUE ACTION: 01  
XMIT:

2009 DEC -3 PM 3:59  
658 11 0 PM 3:59  
20091203

**Florida** *The Sunshine State*

**DRIVER LICENSE CLASS E**  
**N600-160-74-285-0**

**DUFIRSTSON NEREE**  
 166 NE 54 ST  
 MIAMI, FL 33137-2416  
 DOB **08-05-1974** SEX **M** HGT **5-09**  
 ISSUED **08-16-2007**  
 EXPIRES **08-05-2015**  
 REAL **A**  
 EXP **08**

*D. Nere*

X620708152500 SAFE DRIVER  
 Operation of a motor vehicle constitutes consent to any sobriety test required by law.

2009 DEC -3 PM 3:59  
 PRISCH  
 DUFIRSTSON

091

63-643/670  
00665

Dufirstson Neree  
CAMPAIGN FUND  
166 NE 54 St  
Miami, FL 33137

Dec. 3, 2009

DATE \_\_\_\_\_

PAY  
TO THE  
ORDER OF

CITY OF MIAMI

\$ 682.00

Six Hundred Eighty Two and 00/100

DOLLARS



Security  
Features  
Delts or  
Back



**WACHOVIA**

Wachovia Bank, N.A.  
wachovia.com

FOR

Qualifying

*Dufree*

⑈00009⑈ ⑆067006432⑆ 2000048416874⑈

2009 DEC -3 PM 3:59  
CRISTINA... SON



City of Miami  
OFFICIAL RECEIPT

No. 339002

Date: 12/03/09

\$ 682.<sup>00</sup> Sales Tax \$ — Total \$ 682.<sup>00</sup>

Six hundred and eighty-two /100 Dollars

Received from: Dupireston Nere Campaign Fund

Address: 166 NE 54 St. Miami, FL 33137

For: Qualifying Fee

Reference No: CR#091

This Receipt not VALID unless dated, filled in and signed by authorized employee of department or division designated hereon and until the City has collected the proceeds of any checks tendered as payment herein.

By: N. Ewan

Department: City Clerk

Division:

C FN/TM 402 Rev. 03/03

Distribution: White - Customer; Canary - Finance; Pink - Issuing Department

2009 DEC 03 PM 3:59  
RISOR

**Candidate Qualification Checklist**

<b>QUALIFYING A CANDIDATE</b>		
		Print Candidate Name
<b>DOCUMENT PRE-CHECK</b>		<i>Dufirston Nese</i>
<input type="checkbox"/> Voter's Registration Card	<input checked="" type="checkbox"/> Picture ID	<input checked="" type="checkbox"/> Proof of Residency
<input checked="" type="checkbox"/> Campaign Check (Com-\$682 Mayor-\$1,600)/affidavit/certificate		
<b>REQUIRED FORMS</b>		
1	Appointment of Campaign Treasurer and Designation of Campaign Depository	<input checked="" type="checkbox"/>
2	Statement of Candidate	<input checked="" type="checkbox"/>
3	Affidavit of Candidate (Check for completeness, do not sign or notarize until end)	<input checked="" type="checkbox"/>
4	Form 1 Statement of Financial Interests for prior year (Check completeness)	<input checked="" type="checkbox"/>
5	State Loyalty Oath	<input checked="" type="checkbox"/>
<b>OPTIONAL FORMS</b>		
6	City Loyalty Oath (Notarize after checking for completeness)	<input type="checkbox"/>
7	County Ethics Declaration (Check for completeness)	<input type="checkbox"/>
<b>TO DO</b>		
A	Make 1 copy of Voter's Registration, 3 Copies of Picture ID (copy of copy difficult to read), 1 Copy of Proof of Residency and return originals to candidate.	<input checked="" type="checkbox"/>
B	Copy of Proof of residency for one year prior to qualifying and current time (i.e., copy of deed, mortgage, lease, utility bill, affidavit, etc.) highlight significant dates	<input checked="" type="checkbox"/>
C	Verify that address is appropriate City address and that it falls within district boundary, if running for Commission seat. Print ARPS. Correct District Number is printed on voter's registration card. Highlight and Verify!	<input checked="" type="checkbox"/>
D	Copy of Drivers license or other picture ID Highlight name and address.	<input checked="" type="checkbox"/>
E	Copy of Voter's registration card - verify precinct, Highlight precinct, commission district and address	<input checked="" type="checkbox"/>
F	Check from campaign account (\$1,600 for mayor, <u>\$682</u> for commissioner) made payable to City of Miami. Or Affidavit(s). Or Petition Certificate. Make 1 copy - put original check in safe.	<input checked="" type="checkbox"/>
G	Write receipt for check. Make 1 copy, return original to candidate.	<input checked="" type="checkbox"/>
H	Make sure every blank is filled and all signatures required are executed. Have candidate take oath that all information is correct to the best of his/her knowledge. <b>"Do you swear (or affirm) that the statements in the affidavit are true and complete to the best of your knowledge and belief?"</b> They need not answer orally or raise their right hand; subsequent signing of the Affidavit is an adequate affirmation response. Then have candidate sign Affidavit of Candidate form; then clerk signs, dates and notarizes form.	<input checked="" type="checkbox"/>
<b>ASSEMBLE DOCUMENTS</b>		
I	Place Documents in following order: Appt of Treas, Statement of Candidate, Affidavit of Candidate, Form 1, State Loyalty Oath, City Loyalty Oath, Ethics Declaration, Copy of Voter's Registration, Copy of Proof of Residency or affidavit, ARPS, Copy of Driver's License, Copy of Check or affidavit(s), Copy of Receipt.	<input checked="" type="checkbox"/>
J	Time-stamp documents and make 2 sets of copies of all documents. Replace Copy of Driver's license with copy made in Step A. Candidate gets one copy of everything. Second set of copies are sent to Supervisor of Elections.	<input checked="" type="checkbox"/>
L	Give candidate a copy elections package (letter and CD). Briefly highlight the election calendar and the clerk's website and explain contents of CD.	<input checked="" type="checkbox"/>
M	Have candidate sign form (see N below), then make 2 copies	<input checked="" type="checkbox"/>
<b>CANDIDATE ACKNOWLEDGMENT OF RECEIPT</b>		
N	I am in receipt of the elections package containing a CD and letter from the City Clerk and I have been provided copies of my time-stamped qualification documents.	<input checked="" type="checkbox"/>
	<i>Dufirston</i>	12/3/09
	Signature	Date