

**STATE OF FLORIDA  
APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**  
(Section 106.021(1), F.S.)

(PLEASE TYPE)

**OFFICE USE ONLY**

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2009 DEC -4 AM 9:23

PRISCILLA J. THOMPSON  
CLERK OF THE CLERK OF COURTS

CHECK APPROPRIATE BOX:

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depository

Name of Candidate <b>Pierre E. Rutledge</b>	1. Address (include post office box or street, city, state, zip code) <b>P.O. Box 371545; Miami, FL 33137</b>
--	--

Telephone (optional) _____	2. Party (Partisan candidates only) <b>Dem</b>	3. Office (add district, circuit or group number) <b>City of Miami Commissioner - District 5</b>
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I have appointed the following person to act as my  Campaign Treasurer     Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer  
**Steven Henriquez**

5. Mailing Address (If post office box or drawer add street address) <b>10022 Hammocks Blvd. #201</b>	6. Telephone <b>305-458-0014</b>
--	-------------------------------------

7. City <b>Miami</b>	8. County <b>Miami-Dade</b>	9. State <b>Florida</b>	10. Zip Code <b>33196</b>
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I have designated the following named bank as my  Primary Depository     Secondary Depository

11. Name of Bank <b>Bank of America</b>	12. Street Address <b>5000 Biscayne Blvd.</b>
--	--

13. City <b>Miami</b>	14. County <b>Miami-Dade</b>	15. State <b>Florida</b>	16. Zip Code <b>33137</b>
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17. Signature of Candidate <b>X</b> <i>Pierre E. Rutledge</i>	Date <b>12-2-09</b>
--	------------------------

**Campaign Treasurer's Acceptance of Appointment**

I, Steven Henriquez, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer     Deputy Treasurer    for the campaign of Pierre E. Rutledge

who is seeking nomination or election as a Democrat candidate to the office of  
(Party)

City of Miami Commissioner - Dist. 5 . As a duly registered voter in Miami-Dade

County, Florida, I am qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

12/2/09  
Date

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

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OFFICE USE ONLY  
KRISCHEN A. ANDERSON  
CLERK

**STATEMENT OF  
CANDIDATE**

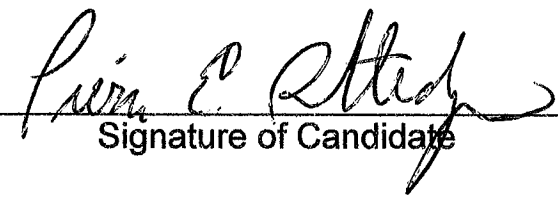
(Section 106.023, F.S.)

(Please Type)

I, Pierre E. Rutledge,

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

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

X   
Signature of Candidate

12-2-09  
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

RECEIVED

2009 DEC -4 AM 9: 23

PRISCILLA W. THOMPSON  
CLERK

COUNTY OF MIAMI-DADE )  
CITY OF MIAMI )

Pierre E. Rutledge (hereinafter "affiant"),

being first duly sworn, deposes and says:

1. My name is Pierre E. Rutledge

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.

(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. 521.

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

798 NW 55<sup>th</sup> St., 33127  
which is my legal address, and I have resided continually at said address from the 21<sup>st</sup> day of Nov. 1969, 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):

Prior Addresses	For the Period
<u>N/A</u>	

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:

400 NW 19<sup>th</sup> Terr., Miami 33136

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)

6755 NW 169<sup>th</sup> St. Miami 33015

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:

Miami-Dade County Public Schools  
1450 NE 2nd Ave., Miami, FL 33132

10. Affiant's occupation: Administrator

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

12 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

2009 DEC 23  
MISCELLANEOUS  
PERSONAL

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

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:

N/A

Affiant's campaign treasurer's name:

Steven Henriquez

\*Affiant's campaign treasurer's address:

10022 Hammocks Blvd. #201; Miami 33196

Telephone numbers: (work) 305-458-0014

(home) \_\_\_\_\_

\*[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:

Pierre E. Rutledge

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

Pierre E. Rutledge  
AFFIANT

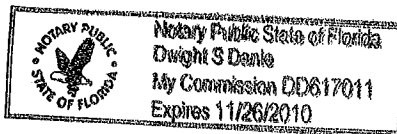
BEFORE ME, the undersigned authority, personally appeared Pierre Rutledge, who, after first being duly sworn, deposes and states that he executed the foregoing to the best of his knowledge and belief.

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

(SEAL)

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

Produced identification



Type of identification produced: Diver's License R343-665-64-421-0

2009 DEC -4 AM 9:23  
PRISONER REGISTRATION  
CITY OF MIAMI

**FINANCIAL INTERESTS**

Please print or type your name, mailing address, agency name, and position below:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Rutledge, Pierre Edmund

MAILING ADDRESS :

798 NW 55th Street

CITY :

Miami

ZIP :

33127

COUNTY :

Miami-Dade

NAME OF AGENCY :

City of Miami

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

City of Miami Commissioner - District 5

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

2009 DEC - 4 AM 9:29  
 PRISON  
 PERSON

**\*\*BOTH PARTS OF THIS SECTION MUST BE COMPLETED\*\***

**DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):

DECEMBER 31, 2008 OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

**MANNER OF CALCULATING REPORTABLE INTERESTS:**

THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR  DOLLAR VALUE THRESHOLDS

**PART A -- PRIMARY SOURCES OF INCOME** [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Miami-Dade County Public Schools	1450 NE 2nd Ave., Miami, FL 33132	Education Administration

**PART B -- SECONDARY SOURCES OF INCOME** [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

**PART C -- REAL PROPERTY** [Land, buildings owned by the reporting person]

400 NW 19th Terr., Miami, FL 33136
2829 Botany Place, Tallahassee, FL 32301
2831 Botany Place, Tallahassee, FL 32301

**FILING INSTRUCTIONS** for when and where to file this form are located at the bottom of page 2.

**INSTRUCTIONS** on who must file this form and how to fill it out begin on page 3.

**OTHER FORMS** you may need to file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
N/A	

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 CLERK OF SUPERIOR COURT  
 TALLAHASSEE, FLORIDA

PART E — LIABILITIES [Major debts]	
NAME OF CREDITOR	ADDRESS OF CREDITOR
Sallie Mae	
GMAC	
Countrywide Mortgage	
Washington Mutual Mortgage	
Litton Loan Mortgage	

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		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
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):  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**  
**CANDIDATES WITH NO PARTY AFFILIATION**  
(Sections 876.05-876.10, Florida Statutes)

OFFICE USE ONLY

2009 DEC -4 AM 9: 24

PRISCILLA J. JOHNSON

STATE OF FLORIDA

Miami-Dade COUNTY

(PLEASE PRINT)

I, 

<u>Pierre</u> First Name	<u>E.</u> Middle Name/Initial	<u>Rutledge</u> 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.

**OATH OF CANDIDATE**

(Section 99.021, Florida Statutes)

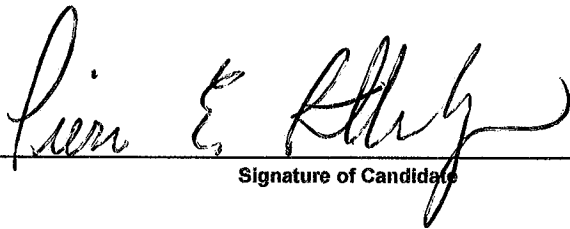
I, Pierre E. Rutledge  
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of City of Miami Commissioner, 5,         ,  
(office) (district) (circuit)  
        . I am a qualified elector of Miami-Dade County, Florida. I am qualified  
(group)

under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected. 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.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.

**SIGN HERE**

  
Signature of Candidate

798 NW 55th St. 305-754-4276           
Mailing Address Day Phone Fax Number

Miami FL 33127 12-2-09  
City State Zip Code Date Signed

LOYALTY OATH

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

2009 DEC -4 AM 9:24

I, Pierre E Rutledge  
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.

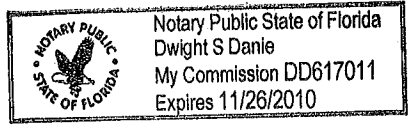
Pierre E. Rutledge  
Signature of Candidate

OATH OF CANDIDATE  
OFFICE OF CITY OF MIAMI COMMISSIONER

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

Pierre E. Rutledge  
(Please print name as you wish it to appear on ballot)

who being sworn, says, ~~he~~/she is a candidate for the office of City of Miami Commissioner, District 5; that ~~he~~/she is a qualified elector of the City of Miami, Florida; that ~~he~~/she is qualified under the Constitution, the Laws of Florida, and City of Miami Charter to hold the office to which ~~he~~/she desires to be elected; that ~~he~~/she has taken the oath required by ss. 876.05 - 876.10, Florida Statutes; that ~~he~~/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 ~~he~~/she seeks; and that ~~he~~/she has resigned or taken a leave of absence from any office from which ~~he~~/she is required to resign or take a leave of absence, pursuant to Section 99.012, Florida Statutes.



Pierre E. Rutledge  
Signature of Candidate  
798 NW 55th St  
Address  
miami, FL 33127  
City State ZIP Code

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

and subscribe before me this 4th day of December, 2009

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

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

Personally Known OR Produced Identification Type of Identification Produced Driver's License R 343-665-64-421-0



Voter Information Card  
Miami-Dade County, FL  
Tarjeta de información del elector  
Condado de Miami-Dade, FL

Kat Enfòmasyon Votè  
Konte Miami-Dade, FL

RUTLEDGE, PIERRE E  
798 NW 55TH ST  
MIAMI FL 33127

ISSUED  
EMITIDA  
ENPRIME

12/26/07

Bring photo identification  
when voting.

Registration No.  
Núm. de inscripción  
Nim. Enskripsyon

Para votar, presente una  
identificación con fotografía.

Tranpri pote yon pyès idantifikasyon  
ki gen foto w sou li lè w ap vin vote.

109204603

Identification Data  
Datos de identificación  
Enfo. Idantifikasyon

Precinct No.  
Núm. del recinto  
Nim. Biwo Vòt

11/21/64

521

Registration Date  
Fecha de inscripción  
Dat Enskripsyon

Party Affiliation  
Afiliasión partidista  
Pati Politik

09/05/88

DEM

Polling Place | Centro de votación | Lokal Biwo Vòt

EDISON TOWERS  
5821 NW 7 AVE

Lester Sola

Supervisor of Elections | Supervisor de Elecciones | Sipèvizè Eleksyon

You are eligible to vote for the representatives from the districts listed below.  
Ud. puede votar por los representantes de los distritos enumerados abajo.  
W elijib pou w vote pou reprezantan ki nan distri ki ekri anba la yo.

Congress  
Congreso  
Kongrè

State Senate  
Senado Estatal  
Sena Eta a

State House  
Cámara Estatal  
Lacham Eta a

017

039

109

County Commission  
Comisión del Condado  
Komisyon Konte

School Board  
Junta Escolar  
Asamble Edikasyon

Community Council  
Consejo Comunitario  
Konsèy Kominotè

03

02

Municipal | Municipal | Minisipal

MI05



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EDISON TOWERS



# Monthly Statement

## Bill-At-A-Glance

Previous Bill	252.98
Payment Received 11-21	162.15CR
Adjustments	1.31
Past Due - Please Pay Immediately	92.14
Current Charges	105.60
<b>Total Amount Due</b>	<b>\$197.74</b>
Current Charges Due in Full by	<b>Dec 21, 2008</b>

## AT&T Benefits

• Thank you for choosing a package plan tailored for your needs. AT&T lets you choose how, when and where you communicate.

## Detail of Payments and Adjustments

Item No.	Date	Description	Adjustments	Payments
1.	11-21	Payment		162.15
2.	11-29	Late Payment Charge - Interest	1.31	
<b>Totals</b>			<b>1.31</b>	<b>162.15</b>

## Billing Summary

Questions? Visit att.com	Page	
<b>Plans and Services</b>	1	92.30
1 888 757-6500		
<b>PIN: 7137</b>		
Repair Service: 611		
<b>AT&amp;T Long Distance Service</b>	2	13.30
1 888 757-6500		
<b>Total Current Charges</b>		<b>105.60</b>

## Plans and Services

### Monthly Service - Nov 29 thru Dec 28

	Quantity	
3. Complete Choice®	1	33.00
Telephone Line (Includes Touch-Tone Service)		
RingMaster® 1		
Three-Way Calling		
Call Waiting ID		
Call Forwarding Busy Line		
Call Forwarding Don't Answer		
Ring Control		
Message Waiting Indication -Audio/Visual		
Repeat Dialing		
Call Return		
Call Trace		
Call Blocking		
Caller-ID Name-Number Delivery		
Anonymous Call Blocking		
Star 98 to Voice Mail		
4. Voice Mail Mailbox	1	6.00
5. Inside Wire Protection	1	7.50
<b>Total Monthly Service</b>		<b>46.50</b>

## News You Can Use Summary

- PREVENT DISCONNECT
  - DID YOU KNOW???
  - AT&T UNIVERSAL CARD
  - CARRIER INFORMATION
  - CALL BEFORE YOU DIG
- See "News You Can Use" for additional information.

## Additions and Changes to Service

This section of your bill reflects charges and credits resulting from account activity.

Item No.	Description	Quantity	Monthly Rate	Amount Billed
	Activity on Nov 20, 2008			
	Order No. ZQBK2771BR			
	Charges for 305 754-4276			
	<b>One-Time Charges</b>			
6.	Restoral of Service	1		30.00

Local Services provided by AT&T Florida.

U.S. Pat. D410,950 and D414,510

2009 DEC -4 AM 9:24  
PIERRE RUTLEDGE



att.com  
 PIERRE RUTLEDGE  
 798 NW 55TH ST  
 MIAMI FL 33127-1859

Page 1 of 3  
 Account Number [REDACTED]  
 Billing Date Nov 29, 2009  
 Web Site att.com

Monthly Statement

Bill-At-A-Glance

Previous Bill	299.43
Payment	.00
Adjustments	7.74
Past Due - Please Pay Immediately	307.17
Current Charges	112.93
<b>Total Amount Due</b>	<b>\$420.10</b>
Current Charges Due In Full by	Dec 21, 2009

AT&T Benefits

\* Thank you for choosing a package plan tailored for your needs. AT&T lets you choose how, when and where you communicate.

Detail of Payments and Adjustments

Item No.	Date	Description	Adjustments	Payments
1.	11-29	Late Payment Charge	5.50	
2.	11-29	Late Payment Charge - Interest	2.24	
<b>Totals</b>			<b>7.74</b>	

Billing Summary

Questions? Visit att.com	Page	
<b>Plans and Services</b>	1	59.86
1 888 757-6500 PIN: 7137 Repair Service: 611		
<b>AT&amp;T Long Distance Service</b>	2	15.12
1 888 757-6500		
<b>AT&amp;T Internet Service</b>	2	37.95
1 888 321-2375		
<b>Total Current Charges</b>		<b>112.93</b>

Plans and Services

**Monthly Service - Nov 29 thru Dec 28**

Item	Description	Quantity	Amount
3.	Complete Choice® Telephone Line (Includes Touch-Tone Service)	1	33.00
	RingMaster® 1		
	Three-Way Calling		
	Call Waiting ID		
	Call Forwarding Busy Line		
	Call Forwarding Don't Answer		
	Ring Control		
	Message Waiting Indication -Audio/Visual		
	Repeat Dialing		
	Call Return		
	Call Trace		
	Call Blocking		
	Caller-ID Name-Number Delivery		
	Anonymous Call Blocking		
	Star 98 to Voice Mail		
4.	Voice Mail Mailbox	1	6.00
5.	Inside Wire Protection	1	7.50
<b>Total Monthly Service</b>			<b>46.50</b>

News You Can Use Summary

- PREVENT DISCONNECT
  - ELECTRONIC PAYMENTS
  - PAYMENT OPTIONS
  - CUSTOMER SUPPORT
  - CARRIER INFORMATION
  - RATE CHANGE
  - CALL BEFORE YOU DIG
- See "News You Can Use" for additional information.

Surcharges and Other Fees

Item No.	Description	Quantity	Amount
6.	Federal Universal Svc Fee-Addl	1	.95
7.	Federal Subscriber Line Charge	1	6.66
<b>Total Surcharges and Other Fees</b>			<b>7.61</b>

Government Fees and Taxes

Item No.	Description	Quantity	Amount
8.	Federal Excise Tax		1.36

Local Services provided by AT&T Florida.  
 U.S. Pat. D410,950 and D414,510

2009 DEC -4 AM 9:26  
 TRISOP  
 SON

STREET ID: 080430 IN USE: YES

--HOUSE RANGE-- QUAD NAME TYPE --SIDE--  
0760 - 0898 NW 55 ST 0 EVEN

FACE: N PRIMARY ZONE: EMPOWERMENT ZONE: N  
ZIP CODE: 331271800 SD1 ZONE: LATIN QUATERS: N  
CENSUS TRACT: 1904 SD2 ZONE: VOTING DISTRICT: 05  
CENSUS BLOCK: 1027 DDRI ZONE: N  
FIRE 901 ZONE: 1047 SEOPWDRI ZONE: N  
FIRE SFBC ZONE: 3A HIST PRESVN DIST: N  
NBHD CODE: 03 SCENIC CORRIDOR: N  
SUB NBHD CODE: 02 PEDESTRIAN PATHWAY: N  
SOLID WASTE ROUTE: 106 OMNI TAX DISTRICT: N  
TRASH ROUTE: 00 DDA DISTRICT: N  
STREET CLEAN ROUTE: 000 CD TARGET AREA: 02

NEXT STREET:

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

2009 DEC 4 AM 9:24  
RISCH

**Florida** *The Sunshine State*

**DRIVER LICENSE CLASS E**  
**R343-665-64-421-0**

**PIERRE EDMUND RUTLEDGE**  
 400 NW 19TH TERR  
 MIAMI, FL 33136-0000

DOB: 11-21-1964 SEX: M HGT: 5-08  
 ISSUED: 05-28-2004  
 EXPIRES: 11-21-2010

*Pierre E. Rutledge* 05-28-2004

1010703200167 SAFE DRIVER  
 Operation of a motor vehicle constitutes consent to any sobriety test required by law.

RECEIVED  
 2009 DEC -4 AM 9:24  
 PRISON  
 WILSON

2009 OCT -4 AM 9:26  
TRISH  
SON

**Florida** *The Sunshine State*  
**DRIVER LICENSE CLASS E**  
**R343-665-64-421-0**  
**PIERRE EDMUND RUTLEDGE**  
400 NW 19TH TERR  
MIAMI, FL 33136-0000  
DOB: 11-21-1964 SEX: M HGT: 5-08  
ISSUED: 05-28-2004  
EXPIRES: 11-21-2010  
*Pierre E. Rutledge* EXPIRES: 05-20-2007  
1010703200167 SAFE DRIVER  
Operation of a motor vehicle constitutes consent to any sobriety test required by law.

YOSEMITE FALLS

Pierre Rutledge  
Campaign Fund

DATE 12-3-09

0091

63-4/630 FL  
3363

PAY TO THE  
ORDER OF

City of Miami

\$ 682.00 -

Six Hundred and Eighty-Two <sup>00</sup>/<sub>100</sub>

DOLLARS

Security Features  
are indicated  
throughout on back

Bank of America



ACH R/T 063100277

FOR Qualifying fee

Pierre P. Rutledge

⑆063000047⑆ 898017230606⑆0091

RECEIVED

2009 DEC -4 AM 9:24

PRISON



City of Miami  
**OFFICIAL RECEIPT**

No. 339004

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

Date: 12/04/09

Six hundred and eighty-two /100 Dollars

Received from: Perre Rutledge Campaign Fund.

Address: 798 NW 55 St. Miami, FL 33127

For: Qualifying Fee Reference No: CK#0091

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: X: Ewan

Department: City Clerk

Division: \_\_\_\_\_

C FN/TM 402 Rev. 03/03

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

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2009 DEC 04 AM 9:26  
RISOR