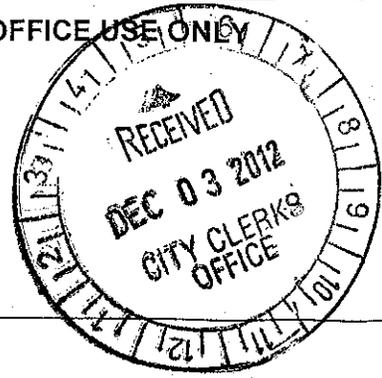


**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

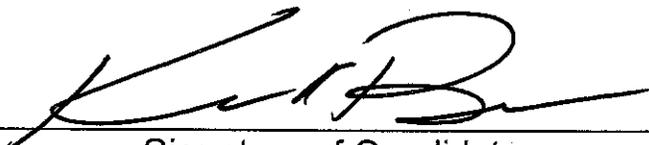
OFFICE USE ONLY



I, KEVIN BURNS

candidate for the office of MAYOR-CITY OF NORTH MIAMI

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

X 
Signature of Candidate

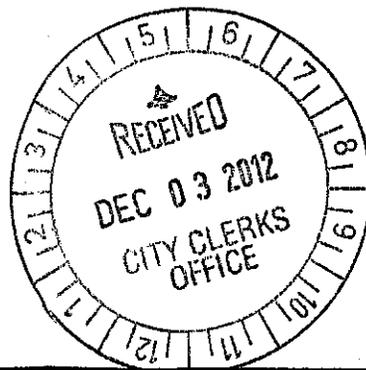
11-27-12
Date

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).

**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.

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)

KEVIN BURNS

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

P.O. Box 610817
NORTH MIAMI FL.

4. Telephone

(305) 710 3306

5. E-mail address

KEVINABURNS@AOL.COM 33261

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

MAYOR - CITY OF NORTH MIAMI

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

KEVIN BURNS

11. Mailing Address

P.O. Box 610817

12. Telephone

(305) 710 3306

13. City

N. MIAMI

14. County

MIAMI-DADE

15. State

FL

16. Zip Code

33261

17. E-mail address

KEVINABURNS@AOL.COM

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

19. Name of Bank

SABRELL UNITED BANK

20. Address

21. City

ADVENTURE

22. County

MIAMI-DADE

23. State

FL

24. Zip Code

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

11-27-12

26. Signature of Candidate

X

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

I, KEVIN BURNS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11-27-12
Date

X

Signature of Campaign Treasurer or Deputy Treasurer