

2012 CANDIDATE QUALIFYING CHECKLIST

Candidate's Name: Charles K. McElyea

Office: **Dania Beach City Commission**

Date Qualified: 6-7-12

Time: 3:45 PM

1. Appointment of Campaign Treasurer and Designation of Campaign Depository (DS-DE 9)
2. Statement of Candidate (DS-DE 84)
3. Loyalty Oath for Non-Partisan Office/Oath of Candidate (DS-DE 25)
4. Notice of Candidacy for City Commission
5. Voter's Registration Documentation (at least 1 year preceding date of election)
6. Statement of Financial Interest (FORM 1)
7. Broward County Statement of Ethical Campaign Practices
8. Receipt of written notice of the provisions of Section 106.1435 - Usage and Removal of Political Campaign Advertisements
9. \$203.82 Election Assessment Fee (Check must be from Campaign account made payable to the City of Dania Beach)
10. \$100.00 Filing Fee (Check must be from Campaign account made payable to the City of Dania Beach)
11. Political Sign Bond Application (\$100.00 check must be from Campaign account made payable to the City of Dania Beach)

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)



RECEIVED

JUN - 7 2012

BY *[Signature]* 1:27 PM

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)

C.K. "MAC" McELYEA

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

229 SE 2nd TERRACE
DANIA BEACH, FL.
33004

4. Telephone

(954) 9246975

5. E-mail address

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

COMMISSIONER

CITY OF DANIA BEACH

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

Name of Treasurer or Deputy Treasurer

ROBERT ADAMS

11. Mailing Address

P.O. Box 1593

12. Telephone

(954) 9253958

13. City

DANIA BEACH

14. County

BROWARD

15. State

FL

16. Zip Code

33004

17. E-mail address

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

19. Name of Bank

COMMUNITY BANK

20. Address

1991 Stirling Rd.

21. City

DANIA BEACH

22. County

BROWARD

23. State

FL

24. Zip Code

33004

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

JUNE 6, 2012

26. Signature of Candidate

X *[Signature]*

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

I, ROBERT ADAMS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

JUNE 6, 2012
Date

X

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

RECEIVED
JUN - 7 2012
BY: *[Signature]* 1:27PM

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)

C. K. "MAC" McELVEA

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

*229 SE 2ND TERRACE
DANIA BEACH FL
33004*

4. Telephone

(954) 929-6975

5. E-mail address

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

*COMMISSIONER
CITY OF DANIA BEACH*

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

Name of Treasurer or Deputy Treasurer

C. K. "MAC" McELVEA

11. Mailing Address

229 SE 2ND TERRACE

12. Telephone

(954) 929-6975

13. City

DANIA BEACH

14. County

BROWARD

15. State

FL

16. Zip Code

33004

17. E-mail address

18. I have designated the following bank as my

Primary Depository

Secondary Depository

19. Name of Bank

COMMUNITY BANK

20. Address

1991 STIRLING RD.

21. City

DANIA BEACH

22. County

BROWARD

23. State

FL

24. Zip Code

33004

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

JUNE 7, 2012

26. Signature of Candidate

X [Signature]

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

I, *C. K. "MAC" McELVEA*, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

Campaign Treasurer

Deputy Treasurer.

JUNE 7, 2012

Date

X [Signature]

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

RECEIVED
JUN - 7 2012
BY: *LS* 1:27 PM

I, CHARLES K. MC ELYEA,

candidate for the office of CITY COMMISSION;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X *Charles K. McElya*
Signature of Candidate

6/7/12
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).

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, C. K. "Mac" Mc ELYEA
(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 nonpartisan office of Commissioner, —,
(office) (district #)
—, —; I am a qualified elector of Broward County, Florida;
(circuit #) (group or seat #)

I am qualified 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; and I will support the Constitution of the United States and the Constitution of the State of Florida.

X [Signature]
Signature of Candidate

954 9315871
Telephone Number

Email Address

229 SE 2nd Terrace Dania Beach FL
Address City State

33004
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 101206530

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

C. K. "Mac" Macelyea

STATE OF FLORIDA

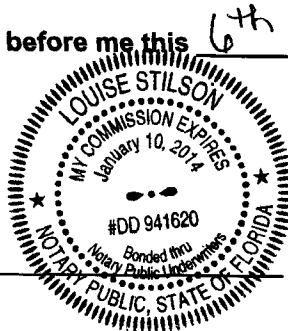
COUNTY OF Broward

Sworn to (or affirmed) and subscribed before me this 6th day of June, 2012.

Personally Known: X or

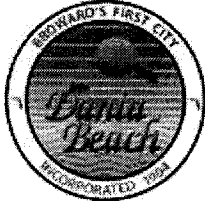
Produced Identification: _____

Type of Identification Produced: _____



[Signature]
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public



**NOTICE OF CANDIDACY FOR
CITY COMMISSIONER**

I, Ch. K. McElye, residing at 229 SE 20th Terr Dania Beach Fl.
(name of candidate) (resident address of candidate)

Dania Beach, Broward County, Florida, by this document give notice of my candidacy for the office of city commissioner of the City of Dania Beach, Florida, in the election to be held in the city on November 6, 2012.

I do further state that I am a bona fide citizen of the United States of America, and a resident of the City of Dania Beach; and that I have resided in and have been a registered voter in the City of Dania Beach, for one (1) year immediately preceding the date of the election to be held; that I am over the age of twenty-one (21) years; that I have paid the qualifying fee for the office, and that I have fully satisfied all conditions precedent to such candidacy, pursuant to the provisions of the charter of the city.

Ch. K. McElye
Signature of candidate

State of Florida
County of Broward

Before me, the undersigned authority, this day personally appeared CHARLES K. MCELYE
(name of candidate)

who, upon being duly sworn, deposed and said: That he or she is the candidate referred to in the foregoing notice; that he or she is familiar with the contents of the notice, and the facts and matters stated in it are true; and that he or she did sign the notice for the purpose specified in it.

Personally Known X or Produced Identification _____

Type of Identification Produced _____

Sworn to and subscribed before me on JUNE 7, 2012.



Louise Stilson
Notary Public
State of Florida

VOTER INFORMATION CARD, BROWARD COUNTY, FL. TARJETA DE INFORMACION DEL ELECTOR, CONDADO DE BROWARD, FL.	
YOUR PRECINCT NUMBER EL NUMERO DE SU RECINTO ELECTORAL ▶ S006 YOUR POLLING LOCATION Su Centro De Votación Frost Park, City of Dania Beach 300 NE 2nd St, Dania Beach, Fl. 33004	REGISTRATION NUMBER 101206530 REGISTRATION DATE Mar/24/1956 PRECINCT S006
YOU ARE ELIGIBLE TO VOTE FOR A REPRESENTATIVE IN EACH DISTRICT LISTED USTED TIENE EL DERECHO DE VOTAR POR UN REPRESENTANTE DE CADA DISTRITO ENUMERADO	
US CONGRESS Congreso de los EUA 20 STATE SENATE Senado Estatal 31 STATE HOUSE Cámara Estatal 100 COUNTY COMMISSION Comisión del Condado 7 SCHOOL BOARD Junta Escolar 1 MUNICIPALITY Municipio Dania Beach	Charles K Mc Eiyea JR 229 SE 2nd Ter Dania Beach FL 33004-0000 Dem Date Issued: Mar/01/2010 Replacement Voter Card
REGISTRATION NO. 101206530 NO. DE INSCRIPCIÓN	

Brenda C. Snipes Dr. Brenda C. Snipes, Supervisor of Elections

Confirmed by SOE since 3-24-56

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

FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME :

McELYEA CHARLES KNOX

MAILING ADDRESS:

229 SE SECOND TERRACE

DANIA BEACH

CITY:

ZIP:

COUNTY:

33004

BROWARD

NAME OF AGENCY:

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

COMMISSIONER, CITY OF DANIA BEACH

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

**** 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 (must check one):

DECEMBER 31, 2011 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 (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions p. 4]

(If you have nothing to report, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
MACS ENTERPRISES OF DANIA, INC	229 SE 2 ND TER DANIA BCH, FL 33004	
MACS TOWING SERVICE INC	418 SW 2 ND PL DANIA BCH FL 33004	
MACS MILLIONS OF PARTS, INC	1200 OLD GRIFFIN RD DANIA BCH, FL 33004	

PART B -- SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4]

(If you have nothing to report, you must write "none" or "n/a")

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 - See instructions p. 4]

(If you have nothing to report, you must write "none" or "n/a")

SEE ATTACHED.

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. - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
N/A	

PART E — LIABILITIES [Major debts - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
N/A	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY	PRESIDENT	SAME AS PART A	
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):

Ch. F. [Signature]

June 7, 2012

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).

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.

Facsimiles will not be accepted.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does **not** relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.

Charles K. McElyea
Part c Real Property

1200 OLD GRIFFEN RD. DANIA BEACH, BROWARD COUNTY

1400 OLD GRIFFEN RD. DANIA BEACH, BROWARD COUNTY

LOT 12 BLK 8 PARK HILL, BROWARD COUNTY

LOT 1 THRU 16 BLK 5 VICTORY HEIGHTS, BROWARD COUNTY

LOT 1 THRU 4 BLK 4 VICTORY HEIGHTS, BROWARD COUNTY

LOT 1 THRU 3, 5 & 11 BLK 3 VICTORY HEIGHTS, BROWARD COUNTY

LOT 2,3,10 & 11 BLK 2 VICTORY HEIGHTS, BROWARD COUNTY

LOT 3 BLK 20 NORTH HOLLYWOOD, BROWARD COUNTY

LOT 5 THRU 9 & 12 BLK 26 TOWN OF DANIA, BROWARD COUNTY

LOT 1 THRU 3 BLK 2 MODELLO PARK, BROWARD COUNTY

LOT 8 BLK 17 NORTH HOLLYWOOD, BROWARD COUNTY

LOT 12 BLK 26 DANIA BEACH, BROWARD COUNTY

LOT 8&9 BLK 2 VICTORY HEIGHTS, BROWARD COUNTY

LOT 1 BLK 2 VICTORY HIEGHTS, BROWARD COUNTY

LOT11, BLK 2 GOLF VIEW, BROWARD COUNTY

Broward County Statement of Ethical Campaign Practices

The Broward County Ethical Campaign Practices Act shall apply to any candidate for elected public office whose constituency resides, in whole or in part, within Broward County, or when the boundaries of the public office sought are located, in whole or in part, within the County. "Candidate" means any person to whom any one or more of the following applies:

- (1) Any person who seeks to qualify for nomination or election by means of the petitioning process;
- (2) Any person who seeks to qualify for election as a write-in candidate;
- (3) Any person who receives contributions or makes expenditures, with a view to bringing about his or her nomination or election to, or retention in, public office;
- (4) Any person who appoints a treasurer and designates a primary depository; or
- (5) Any person who files qualification papers and subscribes to a candidate's oath as required by law.

A candidate's decision regarding whether to execute the statement is strictly voluntary. A candidate executing the Statement of Ethical Campaign Practices shall file the original and a copy of the executed statement, bearing the candidate's signature, with the officer before whom the candidate qualifies within five (5) days after becoming a candidate for the elected public office.

As a candidate for public office in Broward County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore:

- 1. I shall not make my race, color, religion, gender, national origin, physical disability, or sexual orientation an issue in my campaign.
- 2. I shall not make my opponent's race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation an issue in my campaign.
- 3. I will condemn any appeal to prejudice based on race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation.
- 4. I shall not attack or question my opponent's patriotism.
- 5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement nor shall I tolerate or permit members of my campaign organization to engage in such activities.
- 6. I shall not tolerate nor permit members of my campaign organization to engage in activities designed to destroy or remove campaign materials or signs lawfully displayed on public or private property.
- 7. I shall not tolerate my supporters engaging in these activities which I condemn nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group which resorts to the methods and tactics that I hereby condemn.
- 8. I shall run a positive campaign emphasizing my qualifications for office and my positions on issues of public concerns and I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
- 9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting an opponent's credibility.
- 10. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

Executed on this day 7 of June, _____.

WITNESSES:

Jacqueline G. Brown

BY CANDIDATE:

Charles K. McElya

Signature

Charles K. McElya
(Print Name)

STATE OF FLORIDA)

) SS.

COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this

7 day of JUNE

2012, by CHARLES K. MCELYEA who is personally known to me

as identification and who did/did not take an oath.

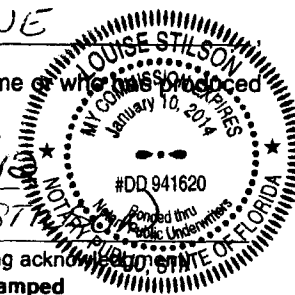
WITNESS my hand and official seal, this

7 day of JUNE, 2012

(NOTARY SEAL)

Louise Stilson
(Signature of person taking acknowledgment)

Louise Stilson
(Name of officer taking acknowledgment, typed, printed, or stamped)



My commission expires:

106.1435 Usage and removal of political campaign advertisements.--

(1) Each candidate, whether for a federal, state, county, or district office, shall make a good faith effort to remove all of his or her political campaign advertisements within 30 days after:

- (a) Withdrawal of his or her candidacy;
- (b) Having been eliminated as a candidate; or
- (c) Being elected to office.

However, a candidate is not expected to remove those political campaign advertisements which are in the form of signs used by an outdoor advertising business as provided in chapter 479. The provisions herein do not apply to political campaign advertisements placed on motor vehicles or to campaign messages designed to be worn by persons.

(2) If political campaign advertisements are not removed within the specified period, the political subdivision or governmental entity has the authority to remove such advertisements and may charge the candidate the actual cost for such removal. Funds collected for removing such advertisements shall be deposited to the general revenue of the political subdivision.

(3) Pursuant to chapter 479, no political campaign advertisements shall be erected, posted, painted, tacked, nailed, or otherwise displayed, placed, or located on or above any state or county road right-of-way.

(4) The officer before whom a candidate qualifies for office shall notify the candidate, in writing, of the provisions in this section.

(5) This provision does not preclude municipalities from imposing additional or more stringent requirements on the usage and removal of political campaign advertisements.

History.--s. 1, ch. 84-221; s. 20, ch. 84-302; s. 14, ch. 87-224; s. 647, ch. 95-147.

Candidate's Name: Chub K. McEgan

Candidate's Signature: Chub K. McEgan

Date Received: 6/7/12

Qualifying Officer's Name: Louise Stilson, City Clerk

Qualifying Officer's Signature: Louise Stilson

Date: 6-7-12

CITY OF DANIA BEACH, FLORIDA			
PAYMENT RECEIPT			
DATE 6-7-12			
RECEIVED FROM:			
Campaign Account of Charles K. McElyea 229 SE 2nd Terrace Dania Beach, FL 33004			
CODE			
	001-00-00-369-90-01		
	1% Election Assessment Fee		\$203.82
	November 6, 2012 Municipal Election		
	Check # 92		
	Paid 6-7-12		
TOTAL Louise Stilson			\$203.82
CLERK	Louise Stilson		

CITY OF DANIA BEACH, FLORIDA			
PAYMENT RECEIPT			
DATE 6-7-12			
RECEIVED FROM:			
Campaign Account of Charles K. McElyea 229 SE 2nd Terrace Dania Beach, FL 33004			
CODE			
MC	Administrative Fee		\$100.00
	November 6, 2012 Municipal Election		
	Check # 92		
	Paid 6-7-12		
	TOTAL <i>Louise Stilson</i>		\$100.00
CLERK	Louise Stilson		



**CITY OF DANIA BEACH
POLITICAL SIGN
BOND AND PERMIT**

TO WHOM IT MAY CONCERN:

The bearer of this permit will be allowed to erect political signs in the City of Dania Beach upon payment of a \$100.00 bond, said bond being refundable upon removal of said signs within 7 days after election for which candidate seeks office.

Acceptance of bond by City shall constitute an agreement between City and candidate providing that City may use all or part of said bond to cover removal of said signs if they are not removed within 7 days after the election.

Candidate Name: C.K. "Mac" McELYEA
Campaign Headquarter Address: 229 S E 2nd Terrace
Dania Beach, FL 33004
Person Applying For Permit: C.K. "Mac" McELYEA
Telephone Number: (954) 931-5871
E-mail Address: _____
Date of Election: Nov. 6, 2012
Type of Election: City County State Federal
Permit Date: June 6, 2012
Amount of Bond: \$100.00



Authorized Signature:

Louise Stilson

Louise Stilson, CMC, City Clerk

cc: Nicolas Lupo, Code Enforcement Manager

CITY OF DANIA BEACH, FLORIDA

PAYMENT RECEIPT

DATE

6-7-12

RECEIVED FROM:

Campaign Account of
 Charles K. McElyea
 229 SE 2nd Terrace
 Dania Beach, FL 33004

CODE

001-0000-220.11-04

Political Sign Bond

November 6, 2012 Municipal Election

Check # *92*

Paid *6-7-12*

\$100.00

TOTAL

Louise Stilson

\$100.00

CLERK

Louise Stilson

PAYMENT DATE
06/07/2012

COLLECTION STATION
City Hall Window 1

RECEIVED FROM
Campaign Account of
Charles K. McElyea

City of Dania Beach
100 W. Dania Beach Blvd.
Dania Beach, FL 33004

BATCH NO.
2012-09001162

RECEIPT NO.
2012-00071236

CASHIER
Finance Cashier I

DESCRIPTION
229 SE 2nd Terrace Dania Beach, FL 33004

PAYMENT CODE	RECEIPT DESCRIPTION	TRANSACTION AMOUNT						
MISC	Miscellaneous Administrative Fee for November 6, 2012 Municipal Election	\$100.00						
OT	Other 1% Election Assessment Fee for November 6, 2012 Municipal Election	\$203.82						
OT	Other Political Sign Bond for November 6, 2012 Municipal Election	\$100.00						
<p data-bbox="295 762 418 793">Payments:</p> <table border="1" data-bbox="423 762 1182 829"> <thead> <tr> <th data-bbox="423 762 581 793">Type</th> <th data-bbox="581 762 1068 793">Detail</th> <th data-bbox="1068 762 1182 793">Amount</th> </tr> </thead> <tbody> <tr> <td data-bbox="423 793 581 829">Check</td> <td data-bbox="581 793 1068 829">92</td> <td data-bbox="1068 793 1182 829">\$403.82</td> </tr> </tbody> </table>	Type	Detail	Amount	Check	92	\$403.82		
Type	Detail	Amount						
Check	92	\$403.82						
Total Amount:		\$403.82						