



City of
Aventura
2020 Municipal Election

Access to the Candidate and Campaign Treasurer Handbook
and
The Election Laws of the State of Florida

Candidate: _____
(Print Name)

Office Sought:

Commissioner Seat 1

Commissioner Seat 3

Commissioner Seat 5

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the City of Aventura 2020 Municipal Candidate Election resources available on the City of Aventura Website, including but not limited to:

Candidate and Campaign Treasurer Handbook; Compilation of the Election Laws of the State of Florida; City of Aventura Charter and Code of Ordinances; City of Aventura Political Sign Code; List of City Vendors; Voter Registration Guide; Items for Sale from Miami-Dade County Elections Department; Campaign Financing Forms; Frequently Asked Questions; and Common Reporting Compliance Errors; as well as website links to the Miami-Dade County Elections Department and State of Florida Division of Elections.

Acknowledged by: _____
Signature of Candidate

Date: _____

Primary Telephone Number: _____

Alternate Telephone Number: _____

E-mail address: _____

(Kindly note your preference for method of contact)