

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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CNMB CITY CLERK'S OFFICE

I, Paule Villard,
candidate for the office of Councilwoman Group 7;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Paule Villard
Signature of Candidate

2/3/15
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)

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NOTE: This form must be on file with the qualifying
officer before opening the campaign account.

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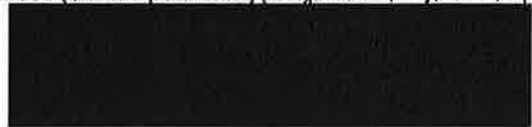
1. CHECK APPROPRIATE BOX(ES):

☒ Initial Filing of Form Re-filing to Change: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

2. Name of Candidate (In this order: First, Middle, Last)

Paul Villard

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



4. Telephone

(305) 336-3925

5. E-mail address

misteenhail@yahoo.com

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

Councilwoman Group 3

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

Aland Pierre Canel

11. Mailing Address

12790 W. Dixie Hi

12. Telephone

(305) 316-0233

13. City

14. County

Dade

15. State

FL

16. Zip Code

331

17. E-mail address

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

19. Name of Bank

BBET

20. Address

12566 NE 6 Ave North Miami 33161

21. City

Miami

22. County

Dade

23. State

FL

24. Zip Code

331

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

11/21/14

26. Signature of Candidate

X Paul Villard

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

I, Aland Pierre Canel, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

11/21/14

Date

X Aland Pierre Canel

Signature of Campaign Treasurer or Deputy Treasurer

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CAMPAIGN TO ELECT PAULE VILLARD

Name

(2) 12790 W. Dixie Hwy

Address (number and street)

N. Miami, FL 33161

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

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(4) Check appropriate box(es):

☒ Candidate Office Sought: North Miami Beach Council

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 1201/2014 / _____ To 1231/2014 / _____ Report Type: 2014-M12

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ 100.00 , _____

Loans \$ 4500.00 , _____

Total Monetary \$ 4600.00 , _____

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ 4468.44 , _____

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ 4468.44 , _____

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ 4600.00 , _____

(10) TOTAL Monetary Expenditures To Date

\$ 4468.44 , _____

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name)

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Handwritten Signature
Signature

(Type name)

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Paule Villard
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

CAMPAIGN TO ELECT PAULE VILLARD

(1) Name _____ (2) I.D. Number _____

(3) Cover Period 12012014 / / through 12312014 / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
120114 / /	Paule Villard [REDACTED]	I	Ret Police C	LOA		3,000.00
1						
120914 / /	Paule Villard [REDACTED]	I	Ret. Police	LOA		1,000.00
2						
120914 / /	Arthur Villard [REDACTED]	I	Entrepreneur	CHE		100.00
3						
121914 / /	Paule Villard [REDACTED]	I	Ret Police C	LOA		500.00
4						
/ /						
/ /						
/ /						
/ /						
/ /						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CAMPAIGN TO ELECT PAULE VILLARD

(2) I.D. Number _____

(3) Cover Period 12012014 / / through 12312014 / /

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
120214 / /	Sinal Consulting Group, LLC 18800 NW 2 Ave Miami, FL 33169	Consulting	MON		2500.00
1					
121014 / /	BB&T 12655 NE 6 Ave N. Miami, FL 33161	Checks Order	MON		156.77
2					
121114 / /	Sinal Consulting Group, LLC 18800 NW 2 Ave Miami, FL 33169	Reimbursement for Supplies, Software, & Name Tag	MON		686.67
3					
121614 / /	Mr. Copy 3683 NW 135 St North Miami, FL 33054	Door Hangers, & Type	MON		625.00
4					
122414 / /	Sinal Consulting Group, LLC 18800 NW 2 Ave Miami, FL 33169	Mailers	MON		500.00
/ /					
/ /					
/ /					

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CANDIDATE'S OFFICE

CAMPAIGN TREASURER'S REPORT SUMMARY

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(1) CAMPAIGN TO ELECT PAULE VILLARD

Name

(2) 12790 W. Dixie Hwy

Address (number and street)

N. Miami, FL 33161

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: _____

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 01012015 / ____ To 01312015 / ____

Report Type: MI

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____

Loans \$ 750.00 _____

Total Monetary \$ 750.00 _____

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 550.00 _____

Transfers to Office Account \$ _____

Total Monetary \$ 550.00 _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 5,350.00 _____

(10) TOTAL Monetary Expenditures To Date

\$ 5,018.44 _____

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Aland Pierre-Canel

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X 
Signature

(Type name) Paule Villard

☒ Candidate ☐ Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name CAMPAIGN TO ELECT PAULE VILLARD (2) I.D. Number _____

(3) Cover Period 01012015 / / through 01312015 / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Occupation				
01092015 / /	Paule Villard [REDACTED]	I	Ret Police C	LOA		750.00
1						
/ /						
2						
/ /						
3						
/ /						
4						
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/ /						
/ /						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CAMPAIGN TO ELECT PAULE VILLARD

(2) I.D. Number _____

(3) Cover Period 01012015 / / through 01312015 / /

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
01132015 / /	Sinal Consulting Group, LLC 18800 NW 2 Ave Miami, FL 33169	Reimbursement for Mailing	MON		400.00
1					
01282015 / /	Mr. Copy 3683 NW 135 St North Miami, FL 330541	Campaign Materials	MON		150.00
2					
/ /					
3					
/ /					
4					
/ /					
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 CNMB CITY CLERK'S OFFICE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CAMPAIGN TO ELECT PAULE VILLARD

Name

(2) 12790 W. Dixie Hwy

Address (number and street)

N. Miami, FL 33161

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Seat 7

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 02012015 / _____ To 02282015 / _____ Report Type: 2015 M02

☐ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ 710.00 , _____

Loans \$ 1500.00 , _____

Total Monetary \$ 2210.00 , _____

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ 2186.00 , _____

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ 2186.00 , _____

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ 7560.00 , _____

(10) TOTAL Monetary Expenditures To Date

\$ 7204.44 , _____

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Aland Pierre-Canel

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X

Signature

(Type name) Paule Villard

☒ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name CAMPAIGN TO ELECT PAULE VILLARD (2) I.D. Number _____

(3) Cover Period 02012015 / / through 02282015 / / (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number						
02242015 / / 1	Josette Saint-Gerard 12955 NW 15th Ave North Miami, FL 33167-1708	I	CHE			200.00
02242015 / / 2	Edwidge Pierre-Noel 16234 NE 8th Ct North Miami Beach, FL 33162	I	CHE			200.00
02242015 / / 3	Hulton V. Austin 253 Greylock Pkwy Belleville, NJ 07109-2722	I	CHE			100.00
02242015 / / 4	Armand Louis 7615 NW 2 Ave #301 Miami, FL 33138	I	CAS			10.00
02272015 / / 5	Ralph Austin 33 Columbira St West Orange, NJ 07052-5540	I	CHE			50.00
02272015 / / 6	Edner Jean Baptiste 12750 NW 1st Ave North Miami, FL 33168	I	CHE			50.00
02272015 / / 7	Dumarsais Pierre	I	CHE			50.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name CAMPAIGN TO ELECT PAULE VILLARD (2) I.D. Number _____

(3) Cover Period 02012015 / ____ / ____ through ____ / ____ / ____ (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
02272015 / /	Paule Villard [REDACTED]	I	Ret Police C	LOA		1,500.00
1						
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CAMPAIGN TO ELECT PAULE VILLARD

(2) I.D. Number _____

(3) Cover Period 02012015 / / through 02282015 / /

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
02242015 / /	Mr. Copy 3683 NW 135 St North Miami, FL 33054	Campaign Materials	MON		650.00
1					
02242015 / /	BB&T 12655 NE 6th Ave N. Miami, FL 33161	Bank Fee	MON		36.00
2					
02242015 / /	Aland Pierre-Canel, CPA, LLC 12794 W. Dixie Hwy N. Miami, FL 33161	Accounting Services	MON		1,500.00
3					
/ /					
4					
/ /					
/ /					
/ /					
/ /					

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