

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

**OFFICE USE ONLY**  
CITY CLERK'S OFFICE  
CITY OF PEMBROKE PINES

2025 OCT -2 PM 4:46

I, James Henry \_\_\_\_\_ ,

candidate for the office of District 1 Commissioner \_\_\_\_\_ ;

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

X  \_\_\_\_\_  
Signature of Candidate

10/02/2025 \_\_\_\_\_  
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).



CITY CLERK'S OFFICE  
CITY OF PEMBROKE PINES  
2025 OCT -2 PM 5:02

## LETTER OF INTENT TO RUN

Date: October 2, 2025

Debra E. Rogers, City Clerk  
City of Pembroke Pines  
601 City Center Way  
Pembroke Pines, FL 33025

Please accept this letter as my formal notice of intent to run for seat  
District 1 Commissioner in the City of Pembroke Pines municipal elections  
scheduled for March 2026 (*election date*).

Sincerely,

Sign: 

Print name: James Henry

*This Letter of Intent to Run must be presented in person to the filing officer—City Clerk—along with the Statement of Candidate Form and Appointment of Campaign Treasurer Form.*

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

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

(PLEASE PRINT OR TYPE)

CITY CLERK'S OFFICE  
CITY OF PEMBROKE PINES

2025 OCT -2 PM 5:02

NOTE: This form must be on file with the filing 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):  
(Please Print or Type Name)  
James Thomas Henry

**3. Address** (include PO Box or Street, City, State, Zip Code):  
1481 SW 81st Ave  
Pembroke Pines, FL 33025

**4. Telephone:**  
(954 ) 658-8196

**5. Candidate's Voter Registration #:**  
101800052  
(not required for qualifying purposes)

**6. Email Address:**  
jhenry382@gmail.com

**7. Office Sought** (include district, circuit, group, or seat #):  
Pembroke Pines District 1 Commissioner

**8. If a candidate for a nonpartisan office, check the box if applicable:**  
 I intend to run as a Write-In Candidate.

**9. If a candidate for partisan office, check the box and fill in the name of the party as applicable:** I intend to run as a  
 Write-In Candidate.    No Party Affiliation Candidate.    \_\_\_\_\_ Party candidate.

**10. I have appointed the following person to act as my:**    Campaign Treasurer    Deputy Treasurer

**11. Name of Treasurer or Deputy Treasurer:**  
James Henry

**12. Telephone:**  
(954 ) 6588196

**13. Email Address:**  
jhenry382@gmail.com

**14. Mailing Address:**  
1481 SW 81st Ave

**15. City:**  
Pembroke Pins

**16. State:**  
FL

**17. Zip Code:**  
33025

**18. I have designated the following bank as my** (check appropriate box):    Primary Depository    Secondary Depository

**19. Name of Bank:**  
TD Bank

**20. Address:**  
7999 Pines Blvd

**21. City:**  
Pembroke Pine

**22. County:**  
Broward

**23. State:**  
FL

**24. Zip Code:**  
33024

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date:** 10/02/2025

**26. Signature of Candidate:**

X 

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

I, James Henry do hereby accept the appointment designated above as:  
(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

**28. Date:** 10/02/2025

**29. Signature of Campaign Treasurer or Deputy Treasurer**

X 