### **Municipal Qualifying Check off List**

Below find a check-off list for items to be returned to the City Clerk's office in order to qualify for office within the City of Miami Gardens.

Qualifying Items	Due by	Date Supplied to City Clerk
Appointment of Campaign Treasurer and Designation of Campaign Depository (DS-DE 9)	4:00 PM, May 26, 2022 Or submitted prior to announcing candidacy.	
Statement of Candidate (DS-DE 84)	4:00 PM, May 26, 2022 Or submitted prior to announcing candidacy.	
Candidate Oath – Nonpartisan Form	4:00 pm, May 26, 2022	
Financial Disclosure Form	4:00 pm, May 26, 2022	
Oath of Candidate Form (to be signed before City Clerk)	4:00 pm, May 26, 2022	
Voluntary Declaration and First Amendment Form (Optional)	4:00 pm, May 26, 2022	
\$400.00 Election Assessment Fee payable to the City of Miami Gardens. (Check must be from Campaign Account)	4:00 pm, May 26, 2022	
\$200.00 Qualifying Fee payable to the City of Miami Gardens. (Check must be from Campaign Account)	4:00 pm, May 26, 2022	
Temporary Sign Bond Application along with \$200.00 check payable to the City of Miami Gardens. (Check must be from Campaign Account)	4:00 pm, May 26, 2022	
Proof of one year continuously residency	4:00 pm, May 26, 2022	
Florida Driver's License or Government Issued Identification	4:00 pm, May 26, 2022	
Voter Registration	4:00 pm, May 26, 2022	
CANDIDATE'S NAME:		

OFFICE:		_
DATE QUALIFIED: _	TIME:	

#### **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.

2. Name of Candidate (in this order: First, Middle, Last)  4. Telephone  5. E-mail address  6. Office sought (include district, circuit, group number)  6. Office sought (include district, circuit, group number)  7. If a candidate for a nonpartisan office, check if applicable:    My intent is to run as a Write-In candidate   My intent is to run as a Write-In candidate   My intent is to run as a Write-In candidate   My intent is to run as a Write-In candidate   My intent is to run as a Write-In candidate   Party candidate.   Party candidate.   Party candidate.   On Name of Treasurer or Deputy Treasurer   Deputy Treasurer	officer before opening the	e campa	ign account.						OFFICI	E USE ONL
2. Name of Candidate (in this order: First, Middle, Last)  4. Telephone  5. E-mail address  6. Office sought (include district, circuit, group number)  7. If a candidate for a nonpartisan office, check if applicable:    My intent is to run as a Write-In candidate   My intent is to run as a Write-In candidate   My intent is to run as a Write-In candidate   My intent is to run as a Write-In candidate   Party candidate   Party candidate   On Name of Treasurer or Deputy Treasurer   10. Name of Treasurer or Deputy Treasurer   11. Mailing Address   12. Telephone	1. CHECK APPROPRIATE	BOX(E	S):							
4. Telephone ( )	Initial Filing of Form	Re	-filing to Change:	Ti	reasurer	Deputy [	Depositor	у 🗌	Office	Par
6. Office sought (include district, circuit, group number)  7. If a candidate for a nonpartisan office, check if applicable:   My intent is to run as a Write-In candidate	2. Name of Candidate (in this order: First, Middle, Last)					de post office	e box or s	street, city,	state, zip	
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 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	4. Telephone	5. E-ma	il address							
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 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	( )									
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 candidate.    Write-In	6. Office sought (include of	listrict, ci	rcuit, group numb	oer)				nonpart	isan office	, check if
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						applica		s to run a	s a Write-I	n candidate
Write-In No Party Affiliation				1 (11)			-			
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer  10. Name of Treasurer or Deputy Treasurer  11. Mailing Address   12. Telephone ( )   13. City   14. County   15. State   16. Zip Code   17. E-mail address    18. I have designated the following bank as my Primary Depository Secondary Depository   19. Name of Bank   20. Address   21. City   22. County   23. State   24. Zip Code    UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND THAT THE FACTS STATED IN IT ARE TRUE.  25. Date   26. Signature of Candidate	8. If a candidate for a part	<u>isan</u> off	ice, check block 	and fill	ın name	e of party as	applicable:	My inte	ent is to rui	ı as a
10. Name of Treasurer or Deputy Treasurer  11. Mailing Address  12. Telephone ( )  13. City  14. County  15. State  16. Zip Code  17. E-mail address  18. I have designated the following bank as my  Primary Depository  9. Name of Bank  20. Address  21. City  22. County  23. State  24. Zip Code  UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND THAT THE FACTS STATED IN IT ARE TRUE.  25. Date  26. Signature of Candidate  X  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) I,  (Please Print or Type Name)  designated above as:  Campaign Treasurer  Deputy Treasurer.	Write-In No I	Party Aff	liation					Pa	irty cand	didate.
11. Mailing Address   12. Telephone (	9. I have appointed the fo	llowing	person to act as	s my	Ca	mpaign Trea	asurer	Deput	ty Treasure	r
13. City	10. Name of Treasurer or D	eputy Ti	easurer							
18. I have designated the following bank as my	11. Mailing Address							12. Tele	ohone	
18. I have designated the following bank as my				1				(	)	
19. Name of Bank  20. Address  21. City  22. County  23. State  24. Zip Code  UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND THAT THE FACTS STATED IN IT ARE TRUE.  25. Date  26. Signature of Candidate  X  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  I,	13. City	14. C	County	15. Sta	ite 16	6. Zip Code	17. E-mail	address		
21. City  22. County  23. State  24. Zip Code  UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND THAT THE FACTS STATED IN IT ARE TRUE.  25. Date  26. Signature of Candidate  X  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  I,	18. I have designated the	followin	g bank as my		] Prim	ary Deposito	ory 🗌	Seconda	ry Deposit	ory
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND THAT THE FACTS STATED IN IT ARE TRUE.  25. Date  26. Signature of Candidate  X  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  I,	19. Name of Bank				20. Add	ress				
25. Date  26. Signature of Candidate  X  27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  I,	21. City		22. County			23. State			24. Zip C	ode
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  I,		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.								
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)  I,, do hereby accept the appointment (Please Print or Type Name)  designated above as: Campaign Treasurer Deputy Treasurer.  X	25. Date				26. Sign	nature of Car	ndidate			
I,, do hereby accept the appointment  (Please Print or Type Name)  designated above as:					X					
(Please Print or Type Name)  designated above as:  Campaign Treasurer  Deputy Treasurer.										
(Please Print or Type Name)  designated above as:  Campaign Treasurer  Deputy Treasurer.	1						do here	hy accer	ot the appo	intment
X		(Pleas	se Print or Type N	Name)			, do note	wy accep	λι τι ο αρρο	Hariont
	designated above as:	designated above as: Campaign Treasurer Deputy Treasurer.								
				X						
Date Signature of Campaign Treasurer or Deputy Treasurer	Date	<b>)</b>		/\	Signatu	re of Campa	ign Treasure	r or Depu	ıty Treasur	er

Rule 1S-2.0001, F.A.C. DS-DE 9 (Rev. 10/10)

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

$\mathbf{\Omega}$		US	=	$\cap$	ш	V
•	 -	. Uu		$\mathbf{v}$	A L	

l,	
candidate for the office of	
have been provided access to read and understand	I the requirements of
Chapter 106, Florida Statutes.	
X	
Signature of Candidate	Date
Each candidate must file a statement with the qualifying of Appointment of Campaign Treasurer and Designation of Campailure to file this form is a first degree misdemeanor and a Financing Act which may result in a fine of up to \$1,000, (ss. 1 Statutes).	paign Depository is filed. Willful civil violation of the Campaign

### CANDIDATE OATH NONPARTISAN OFFICE (Do not use this form if a Judicial or School Board Candidate) Check box only if you are seeking to qualify as a write-in candidate: Write-in candidate OFFICE USE ONLY Candidate Oath (Section 99.021(1)(a), Florida Statutes) (Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box \ (see page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.) am a candidate for the nonpartisan office of (Office) ; I am a qualified elector of \_\_\_\_\_\_\_; Group or Seat #) County, Florida; 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. Candidate's Florida Voter Registration Number (located on your voter information card): Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.] Signature of Candidate Telephone Number Email Address City State ZIP Code Address STATE OF FLORIDA Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: COUNTY OF Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence this \_\_\_\_\_, 20\_\_\_\_

Type of Identification Produced:

Personally Known OR Produced Identification

#### **Compound Last Names**

If your <u>last</u> name consists of two or more names and has no hyphen, check the box in the Candidate Oath section. If you fail to check the box, your name will be listed with the name appearing last on the line. Example: John Jones Smith – If the last name has no hyphen and you do not check the box, the last name on the ballot would be "Smith." If you check the box, your last name would be listed on the ballot as "Jones Smith." If you have a hyphen within your last name, the last name would be listed as "Jones-Smith."

## Guide for Designating Phonetic Spelling of Candidate's Name for Audio Ballot

- 1. Use tables below.
- 2. Use upper case for "stressed" syllables. Use lower case for "unstressed" syllables.
- 3. Use dashes (-) to separate syllables.
- 4. Add any notes such as rhyming examples, silent letters, etc.

Vowels					
Stresse	ed Vowel Sounds	Unstre	Unstressed Vowel Sounds		
EE	(FEET) feet	uh	(SO-fuh) sofa (FING-guhr) finger		
I	(FIT) fit				
Е	(BED) bed				
Α	(KAT) cat (KAD) cad				
АН	(FAH-thur) father (PAHR) par				
АН	(HAHT) hot (TAH-dee) toddy				
UH	(FUHJ) fudge (FLUHD) flood				
UH	(CHUHRCH) church				
AW	(FAWN) fawn	Certain	n Vowel Sounds with R		
U	(FUL) full	AHR	(PAHR) par		
00	(FOOD) food	ER	(PER) pair		
OU	(FOUND) f <i>ou</i> nd	IR	(PIR) peer		
0	(FO) foe	OR	(POR) pour		
El	(FEIT) f <i>i</i> ght	OOR	(POOR) poor		
Al	(FAIT) fate	UHR	(PUHR) purr		
OI	(FOIL) foil				
Y00	(FYOOR-ee-uhs) furious				

	Consonants					
В	(BED) bed	R	(RED) red			
D	(DET) debt	S	(SET) set			
F	(FED) fed	T	(TEN) ten			
G	(GET) get	V	(VET) vet			
Н	(HED) head	Υ	(YET) yet			
HW	(HWICH) which	W	(WICH) witch			
J	(JUHG) <i>j</i> ug	CH	(CHUCRCH) church			
K	(KAD) cad	SH	(SHEEP) sheep			
L	(LAIM) lame	TS	(ITS) its (PITS-feeld) Pittsfield			
M	(MAT) mat	TH	(THEI) <i>Th</i> igh			
N	(NET) net	TH	(THEI) <i>Th</i> y			
NG	(SING-uhr) si <i>ng</i> er	ZH	(A-zhuhr) azure (VI-zhuhn) vision			
Р	(PET) pet	Z	(GOODZ) goods (HUH-buhz-tuhn) Hubbardston			

Examples of Phonetically Spelled Names			
NAME ON BALLOT	PRONOUNCED AS		
Mishaud	mee-SHO ('d' is silent)		
Jahn	HAHN (rhyme: fawn)		
Beauprez	boo-PRAI (rhyme: hooray)		
Maniscalco	man-uh-SKAL-ko		
Tangipahoa	TAN-ji-pah-HO-uh		
Monte	Mahn-TAI		
Tanya	TAWN-yuh (not TAN)		

FORM 1

## **STATEMENT OF**

7	A	7	1
	U	4	1

Please print or type your name, mailing address, agency name, and position below	FINANCIAL	INTERESTS	FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MID	DLE NAME :		_	
MAILING ADDRESS :				
CITY:	ZIP: COUNTY:			
NAME OF AGENCY :				
NAME OF OFFICE OR POSITION I	ELD OR SOUGHT :			
CHECK ONLY IF	OR NEW EMPLOYEE OF	APPOINTEE		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS	**** THIS SECTION MUS			
FILERS HAVE THE OPTION OF FEWER CALCULATIONS, OR L		DS THAT ARE ABSOLUTE LDS, WHICH ARE USUALL	DOLLAR VALUES, WHICH REQUIRES Y BASED ON PERCENTAGE VALUES	
□ COMPARATIVE	PERCENTAGE) THRESHOLDS		AR VALUE THRESHOLDS	
PART A PRIMARY SOURCES OF (If you have nothing to r	INCOME [Major sources of income to eport, write "none" or "n/a")	the reporting person - See instr	uctions]	
PART A PRIMARY SOURCES OF (If you have nothing to r NAME OF SOURCE OF INCOME	eport, write "none" or "n/a") SOI	the reporting person - See instr JRCE'S DRESS	uctions]  DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
( <b>If you have nothing to r</b> NAME OF SOURCE	eport, write "none" or "n/a") SOI	JRCE'S	DESCRIPTION OF THE SOURCE'S	
( <b>If you have nothing to r</b> NAME OF SOURCE	eport, write "none" or "n/a") SOI	JRCE'S	DESCRIPTION OF THE SOURCE'S	
( <b>If you have nothing to r</b> NAME OF SOURCE	eport, write "none" or "n/a") SOI	JRCE'S	DESCRIPTION OF THE SOURCE'S	
(If you have nothing to r  NAME OF SOURCE OF INCOME  PART B SECONDARY SOURCES [Major customers, clients	sort, write "none" or "n/a")  SOI ADI	JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
(If you have nothing to r  NAME OF SOURCE OF INCOME  PART B SECONDARY SOURCES [Major customers, clients	OF INCOME and other sources of income to busines	JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
PART B SECONDARY SOURCES [Major customers, clients (If you have nothing to	OF INCOME and other sources of income to busineseport, write "none" or "n/a")  NAME OF MAJOR SOURCES	JRCE'S DRESS  sses owned by the reporting per	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  rson - See instructions]  PRINCIPAL BUSINESS	
PART B SECONDARY SOURCES [Major customers, clients (If you have nothing to	OF INCOME and other sources of income to busineseport, write "none" or "n/a")  NAME OF MAJOR SOURCES	JRCE'S DRESS  sses owned by the reporting per	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  rson - See instructions]  PRINCIPAL BUSINESS	
PART B SECONDARY SOURCES [Major customers, clients (If you have nothing to  NAME OF BUSINESS ENTITY  PART C REAL PROPERTY [Land	OF INCOME and other sources of income to busineseport, write "none" or "n/a")  NAME OF MAJOR SOURCES	JRCE'S DRESS  sses owned by the reporting per ADDRESS OF SOURCE	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  rson - See instructions]  PRINCIPAL BUSINESS	•
PART B SECONDARY SOURCES [Major customers, clients (If you have nothing to  NAME OF BUSINESS ENTITY  PART C REAL PROPERTY [Land	OF INCOME and other sources of income to busineseport, write "none" or "n/a")  NAME OF MAJOR SOURCES OF BUSINESS' INCOME	JRCE'S DRESS  sses owned by the reporting per ADDRESS OF SOURCE	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  From - See instructions]  PRINCIPAL BUSINESS ACTIVITY OF SOURCE  You are not limited to the space on the lines on this form. Attach additional	e e e e e e e e e e e e e e e e e e e

PART D — INTANGIBLE PERSONAL PROPERTY [Stock (If you have nothing to report, write "none	e" or "n/a")	•	•	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none				
NAME OF CREDITOR		ADDRES	S OF CREDITOR	
PART F — INTERESTS IN SPECIFIED BUSINESSES [O	or "n/a")	s in certain types of bus	inesses - See instructions]  BUSINESS ENTITY # 2	
NAME OF BUSINESS ENTITY				
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST				
PART G — TRAINING For elected municipal officers, agency created under Part III, Chapter 163 required to co	omplete annual ethics t	training pursuant to section	on 112.3142, F.S.	
T CERTIFI THAT I	HAVE COMPLI	TIED THE REQU	JIRED TRAINING.	
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON	A SEPARATE SHE	ET, PLEASE CHECK HERE	
SIGNATURE OF FILE	R:	CPA or ATT	DRNEY SIGNATURE ONLY	
Signature:			ountant licensed under Chapter 473, or attorney be Florida Bar prepared this form for you, he or following statement:	
Date Signed:			, prepared the CE vith Section 112.3145, Florida Statutes, and the Upon my reasonable knowledge and belief, the and correct.	
Buto Digited.		CPA/Attorney Signature	:	
		Date Signed:		

#### FILING INSTRUCTIONS:

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying

**Thereafter**, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2021.

#### **NOTICE**

Annual Statements of Financial Interests are due July 1. If the annual form is not filed or postmarked by September 1, an automatic fine of \$25 for each day late will be imposed, up to a maximum penalty of \$1,500. Failure to file also can result in removal from public office or employment. [s. 112.3145, F.S.]

In addition, failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000. [s. 112.317, F.S.]

#### WHO MUST FILE FORM 1:

- 1) Elected public officials not serving in a political subdivision of the state and any person appointed to fill a vacancy in such office, unless required to file full disclosure on Form 6.
- 2) Appointed members of each board, commission, authority, or council having statewide jurisdiction, excluding members of solely advisory bodies, but including judicial nominating commission members; Directors of Enterprise Florida, Scripps Florida Funding Corporation, and Career Source Florida; and members of the Council on the Social Status of Black Men and Boys; the Executive Director, Governors, and senior managers of Citizens Property Insurance Corporation; Governors and senior managers of Florida Workers' Compensation Joint Underwriting Association; board members of the Northeast Fla. Regional Transportation Commission; board members of Triumph Gulf Coast, Inc; board members of Florida Is For Veterans, Inc.; and members of the Technology Advisory Council within the Agency for State Technology.
- 3) The Commissioner of Education, members of the State Board of Education, the Board of Governors, the local Boards of Trustees and Presidents of state universities, and the Florida Prepaid College Board.
- 4) Persons elected to office in any political subdivision (such as municipalities, counties, and special districts) and any person appointed to fill a vacancy in such office, unless required to file Form 6.
- 5) Appointed members of the following boards, councils, commissions, authorities, or other bodies of county, municipality, school district, independent special district, or other political subdivision: the governing body of the subdivision; community college or junior college district boards of trustees; boards having the power to enforce local code provisions; boards of adjustment; community redevelopment agencies; planning or zoning boards having the power to recommend, create, or modify land planning or zoning within a political subdivision, except for citizen advisory committees, technical coordinating committees, and similar groups who only have the power to make recommendations to planning or zoning boards, and except for representatives of a military installation or retirement boards empowered to invest pension or retirement funds or determine entitlement to or amount of pensions or other retirement benefits, and the Pinellas County Construction Licensing Board.
- 6) Any appointed member of a local government board who is required to file a statement of financial interests by the appointing authority or the enabling legislation, ordinance, or resolution creating the board.
- 7) Persons holding any of these positions in local government: mayor; county or city manager; chief administrative employee or finance director of a county, municipality, or other political subdivision; county or municipal attorney; chief county or municipal building inspector; county

- or municipal water resources coordinator; county or municipal pollution control director; county or municipal environmental control director; county or municipal administrator with power to grant or deny a land development permit; chief of police; fire chief; municipal clerk; appointed district school superintendent; community college president; district medical examiner; purchasing agent (regardless of title) having the authority to make any purchase exceeding \$35,000 for the local governmental unit.
- 8) Officers and employees of entities serving as chief administrative officer of a political subdivision.
- 9) Members of governing boards of charter schools operated by a city or other public entity.
- 10) Employees in the office of the Governor or of a Cabinet member who are exempt from the Career Service System, excluding secretarial, clerical, and similar positions.
- 11) The following positions in each state department, commission, board, or council: Secretary, Assistant or Deputy Secretary, Executive Director, Assistant or Deputy Executive Director, and anyone having the power normally conferred upon such persons, regardless of title.
- 12) The following positions in each state department or division: Director, Assistant or Deputy Director, Bureau Chief, and any person having the power normally conferred upon such persons, regardless of title.
- 13) Assistant State Attorneys, Assistant Public Defenders, criminal conflict and civil regional counsel, and assistant criminal conflict and civil regional counsel, Public Counsel, full-time state employees serving as counsel or assistant counsel to a state agency, administrative law judges, and hearing officers.
- 14) The Superintendent or Director of a state mental health institute established for training and research in the mental health field, or any major state institution or facility established for corrections, training, treatment, or rehabilitation.
- 15) State agency Business Managers, Finance and Accounting Directors, Personnel Officers, Grant Coordinators, and purchasing agents (regardless of title) with power to make a purchase exceeding \$35,000.
- 16) The following positions in legislative branch agencies: each employee (other than those employed in maintenance, clerical, secretarial, or similar positions and legislative assistants exempted by the presiding officer of their house); and each employee of the Commission on Ethics.
- 17) Each member of the governing body of a "large-hub commercial service airport," as defined in Section 112.3144(1)(c), Florida Statutes, except for members required to comply with the financial disclosure requirements of s. 8, Article II of the State Constitution.

#### **INSTRUCTIONS FOR COMPLETING FORM 1:**

**INTRODUCTORY INFORMATION** (Top of Form): If your name, mailing address, public agency, and position are already printed on the form, you do not need to provide this information unless it should be changed. To change any of this information, write the correct information on the form, <u>and contact your agency's financial disclosure coordinator</u>. You can find your coordinator on the Commission on Ethics website: www.ethics. state.fl.us.

**NAME OF AGENCY:** The name of the governmental unit which you serve or served, by which you are or were employed, or for which you are a candidate.

**DISCLOSURE PERIOD:** The "disclosure period" for your report is the calendar year ending December 31, 2021.

**OFFICE OR POSITION HELD OR SOUGHT:** The title of the office or position you hold, are seeking, or held during the disclosure period <u>even if you have since left that position</u>. If you are a candidate for office or are a new employee or appointee, check the appropriate box.

**PUBLIC RECORD:** The disclosure form and everything attached to it is a public record. Your social security number, bank account, debit, charge, and credit card numbers are not required and you should redact them from any documents you file. If you are an active or former officer or employee listed in Section 119.071, F.S., whose home address is exempt from disclosure, the Commission will maintain that confidentiality if you submit a written and notarized request.

#### MANNER OF CALCULATING REPORTABLE INTEREST

Filers have the option of reporting based on <a href="either">either</a> thresholds that are comparative (usually, based on percentage values) <a href="either">or</a> thresholds that are based on absolute dollar values. The instructions on the following pages specifically describe the different thresholds. Check the box that reflects the choice you have made. <a href="either">You must use the type of threshold you have chosen for each part of the form.</a> In other words, if you choose to report based on absolute dollar value thresholds, you cannot use a percentage threshold on any part of the form.

## IF YOU HAVE CHOSEN DOLLAR VALUE THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

#### PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s). The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded \$2,500 of gross income received by you in your own name or by any other person for your use or benefit.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony if considered gross income under federal law, but not child support.

#### Examples:

- If you were employed by a company that manufactures computers and received more than \$2,500, list the name of the company, its address, and its principal business activity (computer manufacturing).
- If you were a partner in a law firm and your distributive share of partnership gross income exceeded \$2,500, list the name of the firm, its address, and its principal business activity (practice of law)
- If you were the sole proprietor of a retail gift business and your gross income from the business exceeded \$2,500, list the name of the business, its address, and its principal business activity (retail gift sales).
- If you received income from investments in stocks and bonds, list <u>each individual company</u> from which you derived more than \$2,500. Do not aggregate all of your investment income.
- If more than \$2,500 of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.
- If more than \$2,500 of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

#### PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A "Primary Sources of Income," if it meets the reporting threshold. You will not have anything to report unless, during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable

- or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); *and*.
- (2) You received more than \$5,000 of your gross income during the disclosure period from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

#### Examples:

- You are the sole proprietor of a dry cleaning business, from which you received more than \$5,000. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).
- You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the above thresholds. List each tenant of the mall that provided more than 10% of the partnership's gross income and the tenant's address and principal business activity.

#### PART C — REAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

#### PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than \$10,000 and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product contained in a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CDs and savings accounts with the same bank. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number found on the lease document).

#### PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed more than \$10,000 at any time during the disclosure period. The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. You are not required to list the amount of any debt. You do not have to disclose credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, then it is not a contingent liability.

#### PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145(7), F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure

period an interest in, or held any of certain positions with the types of businesses listed above. You must make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

#### PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filling, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

## IF YOU HAVE CHOSEN COMPARATIVE (PERCENTAGE) THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

#### PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s), but income from these public sources should be included when calculating your gross income for the disclosure period. The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should include all of that income when calculating your gross income and disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded 5% of the gross income received by you in your own name or by any other person for your benefit or use during the disclosure period.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony if considered gross income under federal law, but not child support.

#### Examples:

- If you were employed by a company that manufactures computers and received more than 5% of your gross income from the company, list the name of the company, its address, and its principal business activity (computer manufacturing).
- If you were a partner in a law firm and your distributive share of partnership gross income exceeded 5% of your gross income, then list the name of the firm, its address, and its principal business activity (practice of law).
- If you were the sole proprietor of a retail gift business and your gross income from the business exceeded 5% of your total gross income, list the name of the business, its address, and its principal business activity (retail gift sales).
- If you received income from investments in stocks and

bonds, list <u>each individual company</u> from which you derived more than 5% of your gross income. Do not aggregate all of your investment income.

- If more than 5% of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address, and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.
- If more than 5% of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

#### PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A, "Primary Sources of Income," if it meets the reporting threshold. You will **not** have anything to report **unless** during the disclosure period:

- (1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); *and*,
- (2) You received more than 10% of your gross income from that business entity; *and*,
- (3) You received more than \$1,500 in gross income from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

#### Examples:

- You are the sole proprietor of a dry cleaning business, from which you received more than 10% of your gross income—an amount that was more than \$1,500. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).
- You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the thresholds listed above. You should list each tenant of the mall that provided more than 10% of the partnership's gross income, and the tenant's address and principal business activity.

#### PART C — REAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. <u>You are not required to list your residences</u>. You should list any vacation homes, if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

#### PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than 10% of your total assets, and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product contained in a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CD's and savings accounts with the same bank.

Calculations: To determine whether the intangible property exceeds 10% of your total assets, total the fair market value of all of your assets (including real property, intangible property, and tangible personal property such as jewelry, furniture, etc.). When making this calculation, do not subtract any liabilities (debts) that may relate to the property. Multiply the total figure by 10% to arrive at the disclosure threshold. List only the intangibles that exceed this threshold amount. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number which can be found on the lease document). Property that is only jointly owned property should be valued according to the percentage of your joint ownership. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. None of your calculations or the value of the property have to be disclosed on the form.

Example: You own 50% of the stock of a small corporation that is worth \$100,000, the estimated fair market value of your home and other property (bank accounts, automobile, furniture, etc.) is \$200,000. As your total assets are worth \$250,000, you must disclose intangibles worth over \$25,000. Since the value of the stock exceeds this threshold, you should list "stock" and the name of the corporation. If your accounts with a particular bank exceed \$25,000, you should list "bank accounts" and bank's name.

#### PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed any amount that, at any time during the disclosure period, exceeded your net worth. You are not required to list the amount of any debt or your net worth. You do not have to disclose: credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, it is not a contingent liability.

Calculations: To determine whether the debt exceeds your net worth, total all of your liabilities (including promissory notes, mortgages, credit card debts, judgments against you, etc.). The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. Subtract the sum total of your liabilities from the value of all your assets as calculated above for Part D. This is your "net worth." List each creditor to whom your debt exceeded this amount unless it is one of the types of indebtedness listed in the paragraph above (credit card and retail installment accounts, etc.). Joint liabilities with others for which you are "jointly and severally liable," meaning that you may be liable for either your part or the whole of the obligation, should be included in your calculations at 100% of the amount owed.

Example: You owe \$15,000 to a bank for student loans, \$5,000 for credit card debts, and \$60,000 (with spouse) to a savings and loan for a home mortgage. Your home (owned by you and your spouse) is worth \$80,000 and your other property is worth \$20,000. Since your net worth is \$20,000 (\$100,000 minus \$80,000), you must report only the name and address of the savings and loan.

#### PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145(7), F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with, the types of businesses listed above. You are required to make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

#### PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filling, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

#### CITY OF MIAMI GARDENS OATH OF CANDIDATE

Every candidate for the Office of Mayor or City Council Member shall take, sign and subscribe to an Oath providing written notice of their candidacy. The oath shall read as follows:

I,, sweat (specify Mayor, or City Council Mem Miami Gardens, Florida; that I am a Miami-Dade County, Florida; that I	qualified elec	ctor of the City of Miami Gardens,
Gardens, Florida, for at least one y continuously for at least one year precederom which I seek to qualify	ear preceding eding today's of for election	today's date (and I have resided date in the respective residential area ); that my legal residence is
ordinances and Municipal Charter of Constitution and the laws of Florida to I have taken the oath required by Chap no other public office in the state, the concurrent with that of the office I nowhich I am required to resign pursual paid the required qualification fee; an Ethical Campaign Practice Ordinance Council to insure fair and ethical camp	hold the office pter 876, Florida ne term of what we seek; that I not to Section 9 and that I agree e and any oth	e to which I desire to be elected; that da Statutes; that I have qualified for ich office or any part thereof runs have resigned from any office from 09.012, Florida Statutes; that I have to abide by Miami-Dade County's
	S	signature of candidate
	P	Printed name of candidate
		Candidate's residential address
Sworn before me this	day of	, 2018
Personally Known or Produced ID		
Type of Identification Produced		Signature of Notary Public son administering Oath)
	Print, Ty	pe or Stamp Commissioned Name

#### DECLARATION AND FIRST AMENDMENT WAIVER

FOR CANDIDATES WHO AGREE TO COMPLY WITH THE *VOLUNTARY* STATEMENT OF FAIR CAMPAIGN PRACTICES

#### AN EXPLANATION REGARDING YOUR RIGHTS

Section 2-11.1.1(D)(2) of the Code of Miami-Dade County, Florida, provides that any candidate for public office in Miami-Dade County may at any time *voluntarily* declare that he or she agrees to abide by the *voluntary* Statement of Fair Campaign Practices. In agreeing to abide by the *voluntary* Statement of Fair Campaign Practices, the candidate recognizes, as compulsory, the authority of the Miami-Dade County Commission on Ethics and Public Trust to decide whether the candidate has violated the *voluntary* Statement of Fair Campaign Practices and, if so, to impose the appropriate penalty, if any.

Before agreeing to abide by the *voluntary* Statement of Fair Campaign Practices, you should carefully read the *voluntary* Statement of Fair Campaign Practices included with this DECLARATION AND FIRST AMENDMENT WAIVER as well as the following information regarding your rights.

The Statement of Fair Campaign Practices is *voluntary*. You are under no obligation to agree to the *voluntary* Statement of Fair Campaign Practices. If you decide not to agree to the *voluntary* Statement of Fair Campaign Practices, you may still run for elective office in Miami-Dade County if you are qualified. There is NO PENALTY if you decide not to sign the *voluntary* Statement of Fair Campaign Practices.

If you decide to agree to the *voluntary* Statement of Fair Campaign Practices, you should know that you will be WAIVING YOUR FIRST AMENDMENT RIGHTS TO FREE SPEECH because certain speech prohibited by the *voluntary* Statement of Campaign Practices is protected by the First Amendment to the U.S. Constitution and Article I, Section 4, of the Florida Constitution. Prior to agreeing to comply with the *voluntary* Statement of Fair Campaign Practices, you should consider consulting an attorney to ensure that you understand the consequences of signing the DECLARATION AND FIRST AMENDMENT WAIVER.

Before signing this DECLARATION AND FIRST AMENDMENT WAIVER, you have the right to request and receive from the Ethics Commission an advisory opinion as to whether your planned campaign activities (e.g., campaign advertisement or statements) are likely to violate the *voluntary* Statement of Fair Campaign Practices. In the event that you sign the DECLARATION AND FIRST AMENDMENT WAIVER, you will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that you may be considering.

A determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER shall not be construed by Miami-Dade County or the Ethics Commission to mean that the candidate is unethical in any way. Further, a determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER should not be construed by any candidate or any other person or entity to mean that the candidate is unethical in any way.

#### INSTRUCTIONS

The DECLARATION AND FIRST AMENDMENT WAIVER, which includes the *voluntary* Statement of Fair Campaign Practices, can be found on page 2 of this form. If you are a candidate for county office and agree to abide by the *voluntary* Statement of Fair Campaign Practices, please sign the DECLARATION AND FIRST AMENDMENT WAIVER and file with the Miami-Dade Commission on Ethics and the Miami-Dade Elections Department. If you are a candidate for municipal office and agree to abide by the *voluntary* Statement of Fair Campaign Practices, please sign and file with the Miami-Dade Commission on Ethics and your respective municipal clerk. For further information, contact the Miami-Dade Office of Governmental Affairs at 305 499-8410.

Miami-Dade Commission on Ethics 19 W. Flagler St., Suite 820 Miami, FL 33130 **Miami-Dade Elections Department** 2700 NW 87<sup>th</sup> Ave. *or* P.O. Box 521550 Doral, FL 33172 Miami, FL 33152-1550

#### DECLARATION AND FIRST AMENDMENT WAIVER

FOR CANDIDATES WHO AGREE TO COMPLY WITH THE *VOLUNTARY* STATEMENT OF FAIR CAMPAIGN PRACTICES

#### **VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES**

As a candidate for public office in Miami-Dade 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, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
- I shall not make my opponent's race, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
- 3. I will condemn any appeal to prejudice based on race, creed, national origin, religion, gender, physical disability, or sexual orientation.
- 4. I shall not, without just cause, attack or question my opponent's patriotism.
- 5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement.
- 6. I shall not tolerate my supporters engaging in these activities that 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 that resorts to the methods and tactics I condemn.
- 7. I shall run a positive campaign emphasizing my qualifications for office and positions on issues of public concern.
- 8. 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 that person's credibility.
- 10. I will take personal responsibility for approving or disavowing the substance of attacks on my opponent that may come from third parties supporting my candidacy.
- 11. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

#### BY SIGNING THIS DECLARATION AND FIRST AMENDMENT WAIVER, I AGREE TO

- ABIDE BY THE VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES,
- SUBMIT TO THE COMPULSORY JURISDICTION OF THE ETHICS COMMISSION, AND
- WAIVE MY FIRST AMENDMENT RIGHTS.

I,please print your name		, a candidate for the office of
	in	,
elective office sought		county, municipality, or other jurisdiction

agree to abide by the voluntary Statement of Fair Campaign Practices as provided in Section 2-11.1.1(D)(1) of the Code of Miami-Dade County, Florida, and to recognize as compulsory the jurisdiction of the Ethics Commission. I further agree that the Ethics Commission will have the authority to decide whether I have violated the *voluntary* Statement of Fair Campaign Practices and, if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any, which may include an admonition or public reprimand. I recognize that I have the right before signing this DECLARATION AND FIRST AMENDMENT WAIVER to consult my own legal counsel and to request and receive from the Ethics Commission an advisory opinion as to whether my planned campaign activities are likely to violate the voluntary Statement of Fair Campaign Practices. I also recognize that after signing this agreement, I will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that I may be considering. I hereby proclaim (1) that my agreement to abide by the Statement of Fair Campaign Practices is voluntary, knowing, and intelligent; (2) that I have not been forced, pressured, or otherwise coerced into making this agreement; and (3) that I am aware of the *voluntary* nature of this agreement. I recognize that there is no penalty for refusing to agree to abide by the *voluntary* Statement of Fair Campaign Practices. I also recognize that in signing this agreement, I will be forfeiting rights to which I would otherwise be entitled under the First Amendment to the U.S. Constitution and Article I, Section 4, of the Constitution of the State of Florida. Once the DECLARATION AND FIRST AMENDMENT WAIVER is signed, it is deemed irrevocable for the duration of the campaign.

×	
Signature	Date

COE, revised 5/2010 2 of 2

### CITY OF MIAMI GARDENS CODE SECTION. 34.670. TEMPORARY SIGNS

&

### SECTION 34-670(c)(3) TEMPOARY NONCOMMERCIAL SPEECH SIGNS SIGN BOND APPLICATION

#### Sec. 34-670. Temporary signs.

- (a) Temporary signs are permitted in the city for 90 days or for a duration of time specified for the type of sign. Temporary signs require a sign permit if specified below. Temporary signs shall not be illuminated. Failure to remove a temporary sign within the allowed time-frame shall result in a violation of this article. No temporary sign shall be located within, on, or over public right-of-way, public lands, or utility poles, or be located in a required sight visibility triangle. No temporary sign shall impede traffic or pedestrian flow, or create an unsafe or hazardous situation on or off the property. Only the sign face shall be counted toward the maximum sign area allowed. No temporary sign shall be placed upon an unimproved lot without the written consent of the property owner filed with the city clerk prior to posting of the sign. The city council shall have the authority to require a temporary sign bond prior to the installation and/or construction of signs in accordance with this section. Signs not posted in accordance with these regulations shall be subject to removal by the city. Any private owner who fails to remove an unlawful sign from his or her property shall be deemed in violation of this section. Any sign not removed within the required time frame shall be considered an abandoned sign and subject to removal without notice.
- (b) Removal; bond required.
  - (1) Application of bond requirement.
    - a. Unless exempt under subsection b. below, for all temporary signs at the time of application or prior to installation where no application is required, the applicant shall provide a refundable cash bond to the city's code enforcement department, the condition of which is that all signs permitted in connection with the bond shall be removed by the applicant in accordance with the time limits provided in this section.
    - b. The bond requirement for temporary signs shall not apply to any person placing five or fewer temporary signs none of which exceeds a sign area of six square feet per sign, or five or fewer special event banners upon the premises of a special event, none of which exceed a sign area of eight square feet per sign. All temporary signs posted pursuant to this subsection shall otherwise comply with the applicable regulations of this section. Any person who posts temporary signs pursuant to an exemption from the bond requirement shall be subject to a \$25.00 penalty per sign which is placed in violation of this section or is not removed within the time frames established by this section.
  - (2) Payment of bond. Bonds shall be in the principal sum of \$200.00 and the bond shall contain language that authorizes the city to use all or any part of the principal of the bond to cover its expenses in removing the signs if the applicant for the sign permit does not remove the sign within this period of time. Candidates for political office who have qualified by the petition method pursuant to F.S. § 99.095, seeking to post political campaign signs shall be exempt from this bond requirement.
  - (3) Failure to obtain approval; removal of signs. If temporary signs are posted and the applicant has failed to obtain approval as required pursuant to this article, the city manager and/or his designee is authorized and directed to cause the signs to be removed immediately. The code compliance director shall keep an estimate of department expenses in removing such signs and no permit will later be granted to any applicant, unless the applicant first pays the expenses of removing such signs, as estimated by the code compliance director. Candidates for political office who have qualified by the petition method pursuant to F.S. § 99.095, seeking to post political campaign signs shall be exempt from this repayment requirement.
  - (4) Responsibility for hazards; responsibility for removal of signs. Anyone who has installed a temporary sign, as well as the occupant or property owner, shall remove all such signs upon the issuance of a hurricane

### CITY OF MIAMI GARDENS CODE SECTION. 34.670. TEMPORARY SIGNS

&

### SECTION 34-670(c)(3) TEMPOARY NONCOMMERCIAL SPEECH SIGNS SIGN BOND APPLICATION

watch for the city by the National Hurricane Center of the National Oceanic and Atmospheric Administration National Weather Service. Failure to remove such signs which pose a hazard in hurricane conditions within 24 hours of the issuance of the hurricane watch shall cause the city to retain the bond related to the sign, if applicable, and remove the sign in accordance with the provisions of this section.

- (c) Temporary signs shall be permitted subject to compliance to the following provisions:
  - (3) Temporary noncommercial speech sign.
    - a. Sign size.
      - (i) The maximum size allowed shall be nine square feet on residential properties and 44 square feet on nonresidential/mixed use properties.
      - (ii) An additional nine square feet of signage (residential) or 32 square feet of signage (nonresidential/mixed-use) may be displayed for the time period beginning 90 days prior to an election and terminating five days after the election.
      - (iii) Banner signs shall be allowed on nonresidential and mixed-use developments, up to a maximum size of ten percent of the building facade area on which the banner is mounted.
    - b. Setback. Signs shall be set back a minimum of five feet from all property lines.
    - c. Sign height. Maximum sign height shall be eight feet.
    - d. Duration.
      - (i) Temporary noncommercial signs shall not be displayed for more than 90 days.
      - (ii) The additional signage described in paragraph (3)a(ii) above shall be erected no earlier than 90 days prior to the first primary election. Signs shall be removed within five days after the last election in the election season.

According to City of Miami Gardens Code of Ordinances; temporary noncommercial speech signs may be displayed on May 25, 2022, which is 90 days prior to the August 23, 2022 Primary Election. This signed application must be submitted to the Office of the City Clerk accompanied with a check payable to the City of Miami Gardens in the amount \$200.00 or a bond in the principal sum of \$200.00 with language that authorizes the city to use all or any part of the principal of the bond to cover its expenses in removing the signs if the applicant for the sign permit does not remove the sign within this period of time. Candidates for political office who have qualified by the petition method pursuant to F.S. § 99.095, seeking to post political campaign signs shall be exempt from this bond requirement.

NAME OF CANDIDATE:	
SIGNATURE OF CANDIDATE:	
DATE:	
CITY CLERK'S SIGNATURE:	
DATE RECEIVED:	