JUDICIAL OFFICE CANDIDATE OATH

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENTE USE ONLY

FloridaNotaryService CPS1-2.0001, F.A.C.

OATH OF CANDIDATE (Section 105.031, Florida Statutes) MANUEL GUZMAN (PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING) MIAM OFFICE DADE am a candidate for the judicial office of ; my legal residence is County, Florida; I am a qualified elector of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; I have qualified to 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 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. Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida. 305 799-4453 carlosmguzman@at **Telephone Number Email Address** Signature of Candidate 33160 BUSCAME BLYD. MIAMI Address ZIP Code Candidate's Florida Voter Registration Number (located on your voter information card): 109747127 * 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) STATE OF FLORIDA COUNTY OF miami - Dade Sworn to (or affirmed) and subscribed before me this _______, 20__\4__. Personally Known: _____ or Signature of Notary Public Produced Identification: Print, Type, or Stamp Commissioned Name of Notary Public Type of Identification Produced: FL Driver License LYNDA T RIMART MY COMMISSION #FF031623 EXPIRES June 26, 2017

FORM 6 2013 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTEREST Please print or type your name, mailing address, agency name, and position below: 2014 APR 24 PM 1:31 LAST NAME - FIRST NAME - MIDDLE NAME: Honorable Carlos Guzman, County Judge, Judicial Circuit(11th) MIAMI-DADE COUNTY ELECTIONS DEPARTMENT MAILING ADDRESS: North Dade Justice Center Room 205, 15555 Biscayne Blvd CITY: ZIP: COUNTY: Aventura, FL Miami-Dade 33160-4615 NAME OF AGENCY : Florida State Courts NAME OF OFFICE OR POSITION HELD OR SOUGHT County Judge, Judicial Circuit(11th) CHECK IF THIS IS A FILING BY A CANDIDATE PART A -- NET WORTH Please enter the value of your net worth as of December 31, 2013, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.] My net worth as of December 31 , 20 <u>13</u> was \$ 461,639 PART B -- ASSETS HOUSEHOLD GOODS AND PERSONAL EFFECTS: Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use. The aggregate value of my household goods and personal effects (described above) is \$ 100,000 ASSETS INDIVIDUALLY VALUED AT OVER \$1,000: VALUE OF ASSET DESCRIPTION OF ASSET (specific description is required - see instructions p.4) 47,266 Checking and Savings accounts, see attachment IRA account, Raymond James, 4 Caulfield Place, #101, Newton, PA, 18940 88,137 Retirement account, FRS, PO Box 1495, Lincolnshire, IL, 60069-1495 112,023 599,000 Home, 410 Luenga Avenue, Coral Gables, FL, 33146 Land, 1.5 Acres, Country Enchantment, Lot 49 Sierra Circle, Cherokee County, Murphy, NC 28906 28.400 PART C -- LIABILITIES LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4): AMOUNT OF LIABILITY NAME AND ADDRESS OF CREDITOR 415,345 Home Mortgage, Rushmore Loan Management Services, PO Box 660592, Dallas, TX, 75266-0592 69.500 Student Loans, American Education Services, Payment Center, Harrisburg, PA, 17130-0001 23,775 Automobile Loan, US Bank, PO Box 790179, St Louis, MO, 63179-0179 4.567 Automobile Lease, Volkswagen Credit, PO Box 5215, Carol Stream, IL 60197-5215 JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: AMOUNT OF LIABILITY NAME AND ADDRESS OF CREDITOR N/A

		PART D	INCOME	RECE	111/
statement identifying each sepa	rate source and amount of i	income which e	return, including all W2's, schedules, exceeds \$1,000, including secondary s	sources of in	come, by completing the
l elect to file a copy of m	y 2013 federal income tax ret d attach a copy of your 2013	turn and all W2' tax return, you	2014 s, schedules, and attachments. need not complete the remainder of the ELEC ADDRESS OF SOURCE OF INCOME	MP1DADE	F COUNTY
PRIMARY SOURCES OF INCO	ME (See instructions on pa	ge 5):		HONS DE	PARTMENT
	OME EXCEEDING \$1,000				
State of Florida		200 E. Gain	nes Street, Tallahassee, FL 32	399	150,891
Gulf Atlantic Collegiate Ass	sociation LLC	917 1st St North #101,Jacksonville Beach, FL32250 1,8			1,850
Miami-Dade County Public	Schools	1450 NE 2	Avenue, Room 602, Miami, FL	33132	834
SECONDARY SOURCES OF INCOME [Major customers, clinical NAME OF MAJOR BUSINESS ENTITY OF BUSINESS		130 17	sinesses owned by reporting persons ADDRESS OF SOURCE	F	ns on page 5]: PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A	N/A	HOOME	N/A		N/A
				-	
411					
Nave Market and Market and D	ADT E INTEDESTS II	N SPECIFIEI	D BUSINESSES [Instructions on	nage 61	
	BUSINESS ENTITY		BUSINESS ENTITY # 2		IESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A	The state of the s	N/A		N/A
ADDRESS OF					
BUSINESS ENTITY PRINCIPAL BUSINESS					
ACTIVITY POSITION HELD					
I OWN MORE THAN A 5%					
INTEREST IN THE BUSINESS NATURE OF MY					
OWNERSHIP INTEREST					
IF ANY OF PARTS A	THROUGH E ARE CO	ONTINUED (ON A SEPARATE SHEET, PLE	ASE CHE	CK HERE 🔽
O.A	ATH		OF FLORIDA		
	22.00 21.002	COUNT			aul .
I, the person whose name app beginning of this form, do depo		Sworn t	to (or affirmed) and subscribed before	me this	day of
and say that the information di		Apo	71 , 20 14 by <u>Car</u>	105 m.	Guzman
and any attachments hereto is		Lyn	da J. Rimant	within.	
and complete.	((Sig d ati	ure of Notary Public-State of Florida);	A 6	LYNDA T RIMART
		Print 7	Type, or Stamp Commissioned Name		COMMISSION #FF031623
	Mr		entropy of the second of the s	398-0153 aced Identific	
SIGNATURE OF REPORTING	OFFICIAL OR CANDIDATE	Type of	Identification Produced FL Drive	Licens	56
she must complete the following I,	ng statement:	, prepared th	in good standing with the Florida Ba ne CE Form 6 in accordance with Ar on my reasonable knowledge and bo	t. II, Sec. 8,	Florida Constitution,
correct.			4/2	4/19	
Signature			'/	Date	
Preparation of this form l	oy a CPA or attorney de	oes not reliev	ve the filer of the responsibility	to sign th	e form under oath.

Honorable Carlos Guzman Form 6 - Full and Public Disclosure of Financial Interest 2013 Attachment

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Part B - Assets

Assets individually valued at over \$1,000:

Description of Asset	Value of Asset
Cash and Savings Accounts	
Chase Bank, PO Box 659754, San Antonio, TX 78265-9754	\$16,191.00
Chase Bank, PO Box 659754, San Antonio, TX 78265-9754	\$6,000.00
USAA Federal Savings Bank, 9800 Fredericksburg Road, San Antonio, TX 78288	\$10,087.00
USAA Federal Savings Bank, 9800 Fredericksburg Road, San Antonio, TX 78288	\$12,279.00
USAA Federal Savings Bank, 9800 Fredericksburg Road, San Antonio, TX 78288	\$2,709.00
Total	\$47,266.00
	,
Part D - Income	
Description of Income	Income
Conference USA, 5201 N O'Connor Blvd, Irving, TX 75039	\$700.00

MIAM	DADE M
COUNTY	

OFFICIAL RECEIPT MIAMI-DADE COUNTY-FLORIDA

No. 6996453

	RECEIVED FROM CAR	los MANUEL QUZA	DATE_	MONTH DAY YEAR
	ADDRESS 15.55	BiscAyNe Blud	205 Cash	MONTH DAY YEAR \$ s \$5.5.20.80 \$5.5.20.80
	AVENTURA	STREET ADDRESS F	33/40 CHECK	s \$ <u>5,520</u> . <u>80</u>
AMOUNT OF: 5	ve Thousand Five H	ON DOLLARS, AND 8	CENTS TOTAL	s 5520.80
FOR PAYMENT OF	- Qualicying 1	Ec- County Court	Prous 34	
				ED EMPLOYEE OF DEPARTMENT.
DEPT.:	ections	By:	Maria	Acosta
FOR OFFI	E USE ONLY			
Trans	Subsidiary	INDEX CODE	Subobject	AMOUNT
107.01-1 6/04				

	AND THE PROPERTY OF THE PROPER
Section 1	1153
	CARLOS MANUEL GUZMAN CAMPAIGN ACCOUNT 15555 BISCAYNE BLVD 205
e ((transvaria))	AVENTURA, FL 33160 DATE # /24/14 - 63-9059-2670
No.	PAY TO THE ORDER OF MICHAEL COUNTY 20 \$5520. 80
	FIFTY AVE HUNDALD AND TWENTY of DOLLARS (1) CONTENTS O
Newspecial Control	BankUnited 1-877-779-2285 www.bankunited.com
West Programme	508 QUALIFYING FEE 12014)GROUP 34
No contraction of	
	FOR QUALIFYING FEE 12014) GROUP 34