



Please print or type your name, mailing address, agency name, and position below:

**RECEIVED**  
FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:  
HANTMAN PERLA TABARES

MAILING ADDRESS:  
16181 WEST TROON CIRCLE

CITY : MIAMI LAKES ZIP : 33014-6548 COUNTY : MIAMI-DADE

NAME OF AGENCY :  
MIAMI DADE COUNTY PUBLIC SCHOOLS - DISTRICT 4

NAME OF OFFICE OR POSITION HELD OR SOUGHT :  
ELECTED CONSTITUTIONAL OFFICER

CHECK IF THIS IS A FILING BY A CANDIDATE

2014 JUN -5 AM 11:54  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**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 13 was \$ 7,671,730.

**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 \$ 500,000

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
SEE ATTACHED SCHEDULE	

**PART C -- LIABILITIES**

**LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
NORTHERN TRUST BANK, 700 BRICKELL AVENUE, MIAMI FLORIDA, 33131	\$ 473,292

**JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

**PART D -- INCOME**

You may ***EITHER*** (1) file a complete copy of your 2013 federal income tax return, including all W2's, schedules, and attachments, ***OR*** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2013 federal income tax return and all W2's, schedules, and attachments.  
 [(If you check this box and attach a copy of your 2013 tax return, you need not complete the remainder of Part D.)]

**PRIMARY SOURCES OF INCOME** (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT

**SECONDARY SOURCES OF INCOME** (Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5):

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
HART REALTY CORP	VERIZON GLOBAL REAL ESTATE	MAIL CODE FLTDSB1W	WIRELESS COMMUNICATIONS
		7701 E. TELECOM PARKWAY	
		TEMPLE TERRACE, FL 33637	

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 PRINCIPAL BUSINESS ACTIVITY OF SOURCE

**PART E -- INTERESTS IN SPECIFIED BUSINESSES** [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
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			

**IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE**

**OATH**

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

STATE OF FLORIDA  
 COUNTY OF Miami-Dade  
 Sworn to (or affirmed) and subscribed before me this 14<sup>th</sup> day of May, 2014 by Perla Tabares Hantman  
Jacqueline Glivens  
 (Signature of Notary Public--State of Florida)  
Jacqueline Glivens  
 (Print/Type, or Stamp Commissioned Name of Notary Public)  
 Personally Known  OR Produced Identification   
 Type of Identification Produced \_\_\_\_\_

Perla Tabares Hantman  
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

**ACQUILINE GLIVENS**  
 Notary Public, State of Florida  
 My Comm. Expires Aug. 14, 2015  
 No. EE113313  
 Arthur J. Gallagher & Co.

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:  
 I, \_\_\_\_\_, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Signature

Date

**Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.**

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**PERLA TABARES HANTMAN 2013**

**PART B - ASSETS**

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000**

<b>DESCRIPTION OF ASSET</b>	<b>VALUE 12-31-13</b>
Arnold & Perla Hantman Investment Management Accounts - Northern Trust Bank	1,583,500.18
Home - 16181 West Troon Circle, Miami Lakes, Florida	1,646,372.00
Perla Hantman - Investment Management Accounts - Northern Trust Bank	2,374,686.68
Certificates of Deposit - Northern Trust Bank	3,012,919.88
Stock - Hart Realty Corporation	775,000.00
Stock - Wellbilt International Corporation	100,000.00
Fidelity Investments - IRA	17,755.81
Cash in Bank - Northern Trust Bank	69,651.34
Cash in Bank - Wells Fargo Bank	23,386.18

