

**CANDIDATE OATH
JUDICIAL OFFICE**

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

RECEIVED

2024 APR 15 AM 8:23

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT OFFICE USE ONLY

Candidate Oath

Name to appear on ballot: Christopher Green

Check box if two last names without hyphen. (Name cannot be changed after qualifying.)

Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the judicial office of County Judge

(Office)



N/A
(District #)

11th, 31; my legal residence is Miami-Dade County, Florida;
(Circuit #) (Group or Seat #)

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 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 for no other public office in the state, the term of which office or any part thereof runs concurrent to the office I seek; I have resigned from any office which I am required to resign pursuant to s. 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 (only applicable if elected and when term of office begins): I am 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.

Statement of Outstanding Fines, Fees, or Penalties

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 105.031(4) F.S.).

YES, I Do _____ NO, I Do Not X

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X Chris Green (305) 496-9211 keepjudgeggreen@gmail.com
Signature of Candidate Telephone Number Email Address

Address of Legal Residence City State ZIP Code

STATE OF FLORIDA
COUNTY OF Miami-Dade

Jacqueline Otruba
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence

this 13 day of April, 2024.

Personally Known OR Produced Identification

Type of Identification Produced: _____



Jacqueline Otruba
Notary Public
State of Florida
Comm# HH072161
Expires 12/14/2024

Phonetic Spelling of Name

Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the 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 3 of this form):

Krihs-tuh-fer Green

Statement of Outstanding Fines, Fees or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity
	<i>N/A</i>

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Affidavit of Nickname (Only required if using nickname for the ballot.)

My legal name is _____ . I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is _____ . I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: _____

STATE OF FLORIDA

COUNTY OF _____

Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence

this _____ day of _____, 20____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

General Information

Name: Hon Christopher Allan Green
 Address: 10710 SW 211TH ST SOUTH DADE JUSTICE CENTER, CUTLER BAY, FL 33189 PID 300401
 County: Miami-Dade

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (11Th)	Elected Constitutional Officer	County Judge

CANDIDATE FOR

Position	Agency Name	Position sought or held
County Judge	11th Judicial Circuit, Miami-Dade County Judge	County Judge <i>Group 31</i>

Net Worth

My Net Worth as of December 31, 2023 was \$ 1,657,925.00.

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2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 04/08/2024

Assets

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, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 20,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Primary Miami residence	\$ 950,000.00
Gainesville Florida property	\$ 215,500.00
Space Coast Credit Union checking and savings accounts	\$ 58,868.00
2019 Nissan Rogue	\$ 17,000.00
2023 Tesla Model 3	\$ 29,000.00
Fidelity Investments IRA account	\$ 55,100.00
Nationwide Retirement Solutions State of Florida 457 account	\$ 9,746.00
Nationwide Retirement Solutions City of Miami 457 account	\$ 585,642.00
Mission Square City of Miami 401k account	\$ 122,527.00
Judicial campaign account loans	\$ 25,000.00

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Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Provident Funding	1255 Corporate Center Drive, Suite 210 Monterey Park, CA 91754	\$ 210,381.00
PennyMac Loan Services	3043 Townsgate Road, Suite 200, Westlake Village, CA 91361	\$ 190,700.00
Wells Fargo Auto	P.O. Box 5265, Sioux Falls, SD, 57117	\$ 27,527.00
Chase Visa	P.O. Box 6294, Carol Stream, IL 60197	\$ 1,850.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2023 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

I elect to file a copy of my 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
State of Florida salary	Eleventh Judicial Circuit, 175 NW 1st Avenue, Miami, FL 33128	\$ 175,663.00
City of Miami GESE pension	2901 Bridgeport Avenue, Miami, FL 33133	\$ 91,915.00
City of Miami	444 SW 2nd Avenue, Miami, FL 33130	\$ 75,251.00
Nationwide City of Miami 457 account distribution	P.O. Box 182797, Columbus, OH 43218	\$ 30,000.00
Fidelity Investments IRA distribution	P.O. Box 28019, Albuquerque, NM 87125	\$ 1,486.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses

Business Entity # 1
N/A

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Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Christopher Allan Green

Digitally signed: 04/08/2024

Filed with COE: 04/08/2024

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ELECTIONS DEPARTMENT

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Freddie Figgers
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Wengay M. Newton, Sr.
Jim Waldman



State of Florida
COMMISSION ON ETHICS
P.O. Drawer 15709
Tallahassee, Florida 32317-5709

Kerrie J. Stillman
Executive Director

Steven J. Zuilkowski
*Deputy Executive Director/
General Counsel*

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(850) 488-3077 (FAX)
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325 John Knox Road
Building E, Suite 200
Tallahassee, Florida 32303

"A Public Office is a Public Trust"

VERIFICATION AND RECEIPT OF SUBMISSION
TO THE ELECTRONIC FINANCIAL DISCLOSURE FILING SYSTEM

This Verification and Receipt of Submission acknowledges that the Commissions on Ethics received a submission through its electronic financial disclosure filing system.

Filer Name: Hon Christopher Allan Green
Filer PID #: 300401

Date Filed: 4/8/2024
Disclosure Received: 2023 Full and Public Disclosure of Financial Interests
Filing ID: 940547

Receipt Print Date: 4/8/2024

The foregoing is a true and accurate depiction of information contained in the electronic financial disclosure filing system held by the Florida Commission on Ethics.

This Verification and Receipt of Submission complies with Sections 112.3144(4) and 112.3145(2)(c), Florida Statutes, and, in accordance with those statutes, it may be presented to any qualifying officer by an incumbent in an elective office or any candidate holding another position subject to an annual filing requirement.

This Verification and Receipt of Submission is not a certification that the form submitted is complete or that the information entered in the form by the filer is true or correct. This Verification and Receipt of Submission is system generated, is created automatically, and its issuance does not indicate that the submission by the filer has been reviewed by Commission staff.

To see the filer's disclosure, visit <https://disclosure.floridaethics.gov/PublicSearch/Filings>. For questions regarding this Verification and Receipt of Submission, please contact the Florida Commission on Ethics at (850) 488-7864.

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ELECTIONS DEPARTMENT



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No.8251110

RECEIVED FROM: Christopher Green

DATE: 4 / 15 / 24
MONTH DAY YEAR

ADDRESS: 13611 S. Dixie Hwy STE 109-366
STREET ADDRESS

CASH \$ _____

Miami CITY FL STATE 33176 ZIP

CHECKS \$ 7224 . 64

AMOUNT OF: seven thousand two hundred twenty four DOLLARS, AND 64 CENTS

TOTAL \$ 7224 . 64

FOR PAYMENT OF: Qualifying fee - County Court Judge - Group 31

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.

DEPT.: Elections

By: [Signature]

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

FOR SECURITY PURPOSES, THE BORDER OF THIS DOCUMENT CONTAINS MICROPRINTING

CHRISTOPHER GREEN CAMPAIGN
13611 S. Dixie Hwy Suite 109-366
Miami FL 33176



103

DATE: 4/14/2024

PAY TO THE ORDER OF: Miami-Dade County
Seven thousand two hundred twenty four + 64/100 DOLLARS

\$ 7,224 64/100

INTERAMERICAN BANK
MIAMI, FL 33165

MEMO: Qualifying fee
Miami-Dade County Judge, 11th Judicial Circuit, Group 31

[Signature]
AUTHORIZED SIGNATURE



MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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