



**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):

**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
	N/A

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

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

My nickname is "Emi". 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: *Emilio Benitez*

STATE OF FLORIDA  
COUNTY OF Broward

*Carolina Brand Garcia*  
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 25th day of April, 2024.

Personally Known  OR Produced Identification

Type of Identification Produced: FL ID



2023 Form 6 - Full and Public Disclosure of Financial Interests

**General Information**

Name: EMILIO BENITEZ  
Address: 3400 N SURF RD APT 7, HOLLYWOOD, FL 33019  
County: Broward

Organization	Suborganization	Title
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N/A

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
County Judge	BROWARD COUNTY COURT	COUNTY COURT SEAT GROUP 32

**Net Worth**

My Net Worth as of December 31, 2023 was \$ 3,060,000.00.

2023 Form 6 - Full and Public Disclosure of Financial Interests

**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 \$ 150,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
RESIDENTIAL PROPERTY	\$ 2,500,000.00
RESIDENTIAL PROPERTY	\$ 150,000.00

**Liabilities**

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
CHASE	3415 VISION DRIVE OH4-7214, COLUMBUS, OH 43219	\$ 80,000.00
CHASE	3415 VISION DRIVE OH4-7214, COLUMBUS, OH 43219	\$ 90,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

2023 Form 6 - Full and Public Disclosure of Financial Interests

**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
LAW PRACTICE	3400 NORTH SURF ROAD, HOLLYWOOD, FL	\$ 122,279.00

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

**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.

**EMILIO BENITEZ**



Digitally signed: 04/26/2024

For Qualifying  
Purposes Only

2024 APR 26 AM 11:37

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

<b>RECEIPT</b>		DATE <u>April 26, 2024</u>	No. <u>279047</u>
RECEIVED FROM <u>Emilio Benitez</u>		\$ <u>7224.64</u>	
FOR <u>Seven Thousand Two Hundred Twenty Four</u>		<u>64/100</u> DOLLARS	
FOR RENT <input type="checkbox"/>		FOR <u>Qualifying Fee</u>	
ACCOUNT # <u>1001</u>	<input type="radio"/> CASH	DEPUTY OF SUPERVISOR OF ELECTIONS FROM _____ TO _____ BY <u>[Signature]</u>	
PAYMENT <u>7224.64</u>	<input checked="" type="radio"/> CHECK		
BAL. DUE _____	<input type="radio"/> MONEY ORDER <input type="radio"/> CREDIT CARD		