

# CANDIDATE OATH -

## STATE AND LOCAL PARTISAN OFFICE

Check applicable one:

- ☒ Candidate with party affiliation  
☐ Candidate with no party affiliation  
☐ Write-in candidate

2020 JUN 10 PM 1:18

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

OFFICE USE ONLY

### Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Santiago C. Vazquez, Jr.

(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 office of Sheriff, \_\_\_\_\_, \_\_\_\_\_,  
(Office) (District #) (Circuit #)

\_\_\_\_\_ ; my legal residence is Broward ☐ County, Florida; I am a qualified elector  
(Group or Seat #)

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.

### Statement of Party

(Section 99.021(1)(b), Florida Statutes)

(Complete Statement of Party only if you are seeking to qualify for nomination as a party candidate.)

I am a member of the Democratic Party; I have not been a registered member of any other political party for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member.

Candidate's Florida Voter Registration Number (located on your voter information card): 101605461

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.]

San-Ti-a-go C. Vaz-Quez

X Santiago Vazquez (954) 496-1500  
Signature of Candidate Telephone Number

bso2020@yahoo.com  
Email Address

4846 N. University Drive #219 Fort Lauderdale Florida 33351  
Address City State ZIP Code

STATE OF FLORIDA

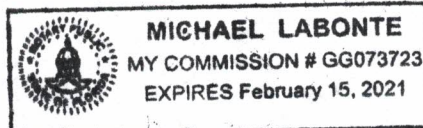
COUNTY OF Broward

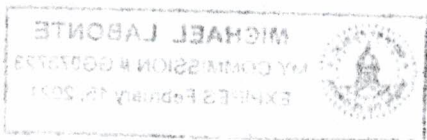
Sworn to (or affirmed) and subscribed before me by ☒ physical or  
☐ online presence this 10 day of June, 2020

Personally Known: ☒ or Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_

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





## FORM 6

FULL AND PUBLIC DISCLOSURE  
OF FINANCIAL INTERESTS

2019

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

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:

Vazquez Santiago C Jr

MAILING ADDRESS:

4846 N. University Drive

Suite #219

CITY:

Fort Lauderdale

ZIP:

33351

COUNTY:

Broward

NAME OF AGENCY:

Santiago C. Vazquez, Jr

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Broward County SHERIFF

CHECK IF THIS IS A FILING BY A CANDIDATE ☒

2020 JUN 10 PM 1:20

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

## PART A — NET WORTH

Please enter the value of your net worth as of December 31, 2019 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 June 6th, 2020 was \$ \$525,000.00

## 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, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 110,000.00

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

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Jewelry	30,000.00
Guns	5,000.00
Art	10,000.00
Household	45,000.00

## PART C — LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Capital One (General Correspondence) P.O.Box 30285 Salt Lake City, UT., 84130-0287	4,256.00
Citi Bank (General Correspondence) 100 CitiBank Drive, San Antonio, TX 78245	12,400.00
Barclay (General Correspondence) P.O. Box 8801 Wilmington, DE. 19899-8801	4,450.00
BrightStar (General Correspondence) 2400 Davie Road, Davie, Florida, 33317	36,722.08

## JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
PennyMac LLC, PO Box 30597, Los Angeles, CA 90030-0597	353,000.00

**PART D -- 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 2019 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 2019 federal income tax return and all W2's, schedules, and attachments.  
[If you check this box and attach a copy of your 2019 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
City of Oakland Park	801 WARRENVILLE Rd - Lisle, IL 60532	74,694.28
Broward County	2601 W. Broward Blvd. Ft. Land	65.00.00

**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

**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			

**PART F - TRAINING**

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

☐ I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

**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

Broward

Sworn to (or affirmed) and subscribed before me by means of

☒ physical presence or ☐ online notarization, this 70 day of

June 20, 2020 by Michael J. Labonte

(Signature of Notary Public--State of Florida)

MICHAEL LABONTE

(Print, Type, or Stamp Commission # 697423

Personally Known OR Produced Identification

Type of Identification Produced

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.

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

**RECEIPT** DATE June 10<sup>th</sup> 2020 No. 279105

RECEIVED FROM Santiago Vazquez \$11,357.64

Seven Thousand Three Hundred Fifty Seven — 64 <sup>100</sup>/<sub>100</sub> DOLLARS

☐ FOR RENT ☒ FOR Qualifying Fee

ACCOUNT	<u>2005</u>
PAYMENT	<u>11,357.64</u>
BAL DUE	<u>—</u>

☐ CASH  
☒ CHECK  
☐ MONEY ORDER  
☐ CREDIT CARD

FROM \_\_\_\_\_ TO                       
BY