

**MIAMI-DADE COUNTY
CANDIDATE OATH –
NONPARTISAN OFFICE**

(For use by Mayoral, County Commission, Community
Council and Property Appraiser Candidates)

OFFICE USE ONLY

Proof of residency provided:

- ☒ Driver's License
☐ Voter Information Card
☐ Property Tax Receipt

- ☐ Utility Bill
☐ Homestead Exemption Receipt
☐ Lease Agreement

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OATH OF CANDIDATE

(Section 99.021, Florida Statute and Section 12-11 of the Code of Miami-Dade County)

I, Pedro J. Garcia
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT - NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of Property Appraiser
(OFFICE) (DISTRICT/AREA/SUBAREA)

I am a qualified elector of Miami-Dade County, Florida; I am qualified under the Constitution and the Laws of Florida and the Home Rule Charter of Miami-Dade County 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; 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.

I affirm that I am a resident of Miami-Dade County, meet the minimum residency requirements for this office, and am submitting proof of my residency in the district for the prescribed period. Under penalties of perjury, I declare that I have read the foregoing Oath of Candidate and that the facts stated in such are true.

X [Signature] (305) 491-5182 PGARCIA@DPA@Gmail.com
Signature of Candidate Telephone Number Email Address

8420 S.W. 47 Street Miami Florida 33155
Address City State Zip Code

Candidate's Florida Voter Registration Number (located on your voter information card): 108986776
108986776

STATE OF FLORIDA
COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 21 day of MAY, 2012.

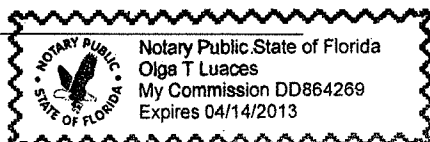
Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced: _____

[Signature]
Signature of Notary Public

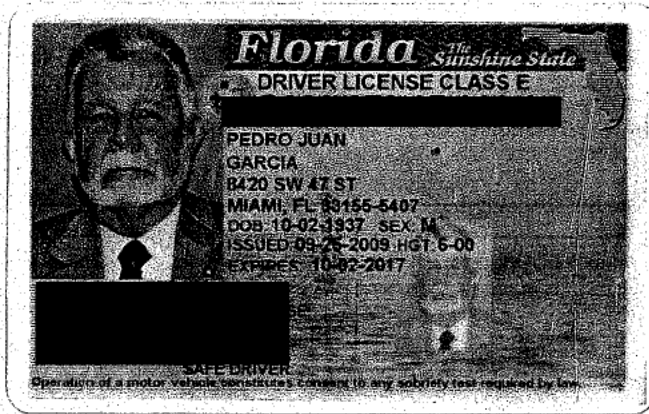
Print, Type, or Stamp Commissioned Name of Notary Public



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FORM 6 FULL AND PUBLIC DISCLOSURE OF 2011

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

FINANCIAL INTERESTS

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LAST NAME — FIRST NAME — MIDDLE NAME:

GARCIA, PEDRO J.

MAILING ADDRESS:

111 N.W. 1st Street, #710

Miami

33128

Miami-Dade

CITY:

ZIP:

COUNTY:

Miami-Dade County

NAME OF AGENCY:

Office of the Property Appraiser

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Property Appraiser

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MIAMI-DADE
ID Code ELECTIONS

ID No.

Conf. Code

P. Req. Code

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, 2011, 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 May 22, 2012 was \$ 1,037,852.00

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.

The aggregate value of my household goods and personal effects (described above) is \$ 90,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)

VALUE OF ASSET

(See Attached)

\$1,037,852

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

Citi Mortgage

\$ 57,975.00

Mercedes Benz Financial Services

7,973.00

Total Liabilities:

\$ 65,948.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

N/A

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2011 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 2011 federal income tax return and all W2's, schedules, and attachments.
[If you check this box and attach a copy of your 2011 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
Miami-Dade county Property Appraiser	111 N.W. 1st Street, #710	
	Miami, FL 33128-1984	

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
N/A			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 5]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	Exclusive Realty, Corp.		
ADDRESS OF BUSINESS ENTITY	7059 S.W. 47th Street, Miami, FL		
PRINCIPAL BUSINESS ACTIVITY	Realtor/Appraisal		
POSITION HELD WITH ENTITY	President/Director		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%		
NATURE OF MY OWNERSHIP INTEREST	Owner		

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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.

[Signature]

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

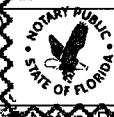
STATE OF FLORIDA
COUNTY OF

Miami-Dade

Sworn to (or affirmed) and subscribed before me this 21ST day of

May, 2012 by Pedro T. Garcia

[Signature]
(Signature of Notary Public--State of Florida)


 Notary Public State of Florida
 Olga T. Luaces
 My Commission DD864269
 Expires 04/14/2013

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced _____

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.

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Pedro J. Garcia
Property Appraiser
Miami-Dade County
2011 Financial Disclosure Assets

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<u>Assets</u>	<u>Value</u>
2008 Mercedes Benz ML 350	\$ 28,000
2000 Boston Whaler Boat	\$ 50,000
Primary Residence – 8420 S.W. 47 th St., Miami	\$ 360,000
Investment Property – 8415 S.W. 47 th St., Miami	\$ 213,000
Condo Warehouse – 7059 S.W. 47 th St., Miami	\$ 95,000
Bank Account CD	\$ 161,800
Bank Account Checking	\$ 15,000
ICMA RC Retirement Plan	\$ <u>91,000</u>
Total:	<u>\$ 1,013,800</u>

For the year Jan. 1-Dec. 31, 2011, or other tax year beginning

2011, ending

20

See separate instructions.

Your first name and initial

PEDRO

J

Last name

GARCIA

Your social security number

If a joint return, spouse's first name and initial

AMALIA

N

Last name

GARCIA

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.

8420 SW 47 STREET

Apt. no.

▲ Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

MIAMI

FL 33155

Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

☒ You☒ Spouse

Filing Status

1

☐ Single

2

☒ Married filing jointly (even if only one had income)

3

☐ Married filing separately.

4

☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5

☐ Qualifying widow(er) with dependent child

Check only one box.

Enter spouse's SSN above and full name here. ▶

Exemptions

6a

☒

Yourself. If someone can claim you as a dependent, do not check box 6a

b

☒

Spouse

c

Dependents:

(1) First name

Last name

(2) Dependent's social security number

(3) Dependent's relationship to you

(4) ☒ If child under age 17 qualifying for child tax credit (see instr.)

Boxes checked on 6a and 6b

No. of children on 6c who:

• lived with you
• did not live with you due to divorce or separation (see instr.)Dependents on 6c not entered above
Add numbers on lines above

2.

d Total number of exemptions claimed

2.

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2

8a Taxable interest. Attach Schedule B if required

b Tax-exempt interest. Do not include on line 8a

9a Ordinary dividends. Attach Schedule B if required

b Qualified dividends

10 Taxable refunds, credits, or offsets of state and local income taxes

11 Alimony received

12 Business income or (loss). Attach Schedule C or C-EZ

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐

14 Other gains or (losses). Attach Form 4797

15a IRA distributions

15a

b Taxable amount

16a Pensions and annuities

16a

b Taxable amount

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

18 Farm income or (loss). Attach Schedule F

19 Unemployment compensation

20a Social security benefits

20a

24,455.

b Taxable amount

21 Other income. List type & amount

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶

23 Educator expenses

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ

25 Health savings account deduction. Attach Form 8889

26 Moving expenses. Attach Form 3903

27 Deductible part of self-employment tax. Attach Schedule SE

28 Self-employed SEP, SIMPLE, and qualified plans

29 Self-employed health insurance deduction

30 Penalty on early withdrawal of savings

31a Alimony paid b Recipient's SSN ▶

32 IRA deduction

33 Student loan interest deduction

34 Tuition and fees. Attach Form 8917

35 Domestic production activities deduction. Attach Form 8903

36 Add lines 23 through 35

37 Subtract line 36 from line 22. This is your adjusted gross income ▶

7 137,031.

8a 2,018.

9a

10

11

12 -1,614.

13

14

15b

16b

17 -709.

18

19

20b 20,787.

21

22 157,513.

23

24

25

26

27

28

29

30

31a

32

33

34

35

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36

37

0.

157,513.

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	157,513.
39a	Check <input checked="" type="checkbox"/> You were born before January 2, 1947, <input type="checkbox"/> Blind. <input checked="" type="checkbox"/> Spouse was born before January 2, 1947, <input type="checkbox"/> Blind.	Total boxes checked 39a	2	
Standard Deduction for --	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here 39b		
• People who check any box on line 39a or 39b, or who can be claimed as a dependent, see instr.	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	14,508.
• All others:	41	Subtract line 40 from line 38	41	143,005.
Single or Married filing separately, \$5,800	42	Exemptions. Multiply \$3,700 by the number on line 6d	42	7,400.
Married filing jointly or Qualifying widow(er), \$11,600	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	135,605.
Head of household, \$8,500	44	Tax (see instr.). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> 962 election	44	26,151.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	26,151.
	47	Foreign tax credit. Attach Form 1116 if required	47	
	48	Credit for child and dependent care expenses. Attach Form 2441	48	
	49	Education credits from Form 8863, line 23	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit (see instructions)	51	
	52	Residential energy credits. Attach Form 5695	52	300.
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
	54	Add lines 47 through 53. These are your total credits	54	300.
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	25,851.
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59a	Household employment taxes from Schedule H	59a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
	60	Other taxes. Enter code(s) from instructions	60	
	61	Add lines 55 through 60. This is your total tax	61	25,851.
Payments	62	Federal income tax withheld from Forms W-2 and 1099	62	23,895.
	63	2011 estimated tax payments & amt. applied from 2010 return	63	
	64a	Earned income credit (EIC)	64a	
	b	Nonrefundable combat pay election 64b		
	65	Additional child tax credit. Attach Form 8812	65	
	66	American opportunity credit from Form 8863, line 14	66	
	67	First-time homebuyer credit from Form 5405, line 10	67	
	68	Amount paid with request for extension to file	68	
	69	Excess social security and tier 1 RRTA tax withheld	69	
	70	Credit for federal tax on fuels. Attach Form 4136	70	
	71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71	
	72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	23,895.
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	
	74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	74a	
Direct deposit? See instructions.	b	Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number <input type="text"/>		
	75	Amt. of line 73 you want applied to your 2012 estimated tax	75	
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	1,956.
	77	Estimated tax penalty (see instructions)	77	

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete below. ☐ No

Designee's name **PREPARER** Phone no. **305-441-1400** Personal identification number (PIN) **12345**

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Date Your occupation **ELECTIVE OFFICIAL** Daytime phone number **305-552-7828**

Joint return? ☐ See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation **HOUSEWIFE** If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name **ROBERT A ORTEGA** Preparer's signature Date Check ☐ if self-employed PTIN **P01073242**

Firm's name **ORTEGA AND COMPANY PA** Firm's EIN **59-1680263**

Firm's address **2307 DOUGLAS RD SUITE 302 MIAMI FL 33145** Phone no. **305-441-1400**

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Name(s) shown on Form 1040

PEDRO J GARCIA

Your social security number

Caution. Do not include expenses reimbursed or paid by others.
Medical and dental expenses (see instructions)

Medical
and
Dental
Expenses

1 Medical Expenses 2,316.

2 Enter amount from Form 1040, line 38 2 157,513.

3 Multiply line 2 by 7.5% (.075)

4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-

Taxes You
Paid

5 State and local (check only one box):

a ☐ Income taxes, or

b ☒ General sales taxes

6 Real estate taxes (see instructions)

7 Personal property taxes

8 Other taxes. List type and amount ▶

9 Add lines 5 through 8

Interest
You Paid

10 Home mortgage interest and points reported to you on Form 1098

11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instr. and show that person's name, identifying no., and address ▶

Note.

Your mortgage interest deduction may be limited (See inst.)

12 Points not reported to you on Form 1098. See instr. for special rules

13 Mortgage insurance premiums (see instructions)

14 Investment interest. Attach Form 4952 if required. (See instructions.)

15 Add lines 10 through 14

Gifts to
Charity

16 Gifts by cash or check. If you made any gift of \$250 or more, see inst.

If you made a gift and got a benefit for it, see instructions.

17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500

18 Carryover from prior year

19 Add lines 16 through 18

Casualty and

Theft Losses

20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)

Job
Expenses
and
Certain
Miscel-
laneous
Deduc-
tions

21 Unreimbursed employee expenses--job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶

22 Tax preparation fees

23 Other expenses -- investment, safe deposit box, etc. List type and amount ▶

24 Add lines 21 through 23

25 Enter amount from Form 1040, line 38 25

26 Multiply line 25 by 2% (.02)

27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-

Other
Miscel-
laneous
Deductions

28 Other -- from list in instructions. List type and amount ▶

Total
Itemized
Deduc-
tions

29 Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40

30 If you elect to itemize deductions even though they are less than your standard deduction, check here ☐

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0.

8,785.

3,183.

3,183.

2,190.

350.

0.

2,540.

20

21

22

23

24

26

27

28

29

14,508.

SCHEDULE B

(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Interest and Ordinary Dividends

▶ Attach to Form 1040A or 1040.

▶ See Instructions.

OIA B No. 1545-0074

2011

Attachment
Sequence No. 08

Name(s) shown on return

PEDRO J GARCIA

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Your social security number

Part I

Interest

(See instructions for Form 1040A, or Form 1040, line 8a.)

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶

INTERCONTINENTAL BANK

INTEREST SUBTOTAL

ABP ADJUSTMENT

- 2 Add the amounts on line 1
- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815
- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶

Note. If line 4 is over \$1,500, you must complete Part III.

Amount

2,018.

2,018.

2,018.

2,018.

Amount

Part II

Ordinary Dividends

(See instructions for Form 1040A, or Form 1040, line 9a.)

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

- 5 List name of payer ▶

- 6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶

Note. If line 6 is over \$1,500, you must complete Part III.

5

6

0.

0.

Part III Foreign Accounts and Trusts

(See instructions)

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a At any time during 2011, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions
- If "Yes," are you required to file Form TD F 90-22.1 to report that financial interest or signature authority? See Form TD F 90-22.1 and its instructions for filing requirements and exceptions to those requirements

- b If you are required to file Form TD F 90-22.1, enter the name of the foreign country where the financial account is located ▶

- 8 During 2011, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

Yes No

X

X

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss from Business

(Sole Proprietorship)

OMB No. 1545-0074

2011

Attachment
Sequence No. **09**

- ▶ For information on Schedule C and its instructions, go to www.irs.gov/schedulec
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

PEDRO J GARCIA

Social security number (SSN)

A Principal business or profession, including product or service (see instructions)

REAL ESTATE

B Enter code from instructions

▶ **531210**

C Business name. If no separate business name, leave blank.

FUN AT SEA LLC

D Employer ID number (EIN). (see instr.)

E Business address (including suite or room no.) ▶ **7055 SW 47 ST UNIT 18**

City, town or post office, state, and ZIP code **MIAMI**

FL 33155

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶

G Did you "materially participate" in the operation of this business during 2011? If "No," see instructions for limit on losses

☒ Yes ☐ No

H If you started or acquired this business during 2011, check here

I Did you make any payments in 2011 that would require you to file Form(s) 1099? (see instructions)

☐ Yes ☒ No

J If "Yes," did you or will you file all required Forms 1099?

☐ Yes ☒ No

Part I Income

1a Merchant card and third party payments. For 2011, enter -0-

b Gross receipts or sales not entered on line 1a (see instructions)

c Income reported to you on Form W-2 if the "Statutory Employee" box on that form was checked. **Caution.** See instr. before completing this line

d Total gross receipts. Add lines 1a through 1c

2 Returns and allowances plus any other adjustments (see instructions)

3 Subtract line 2 from line 1d

4 Cost of goods sold (from line 42)

5 Gross profit. Subtract line 4 from line 3

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

7 Gross income. Add lines 5 and 6

1a

1b

1c

1d

2

3

4

5

6

7

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0.

0.

0.

0.

Part II Expenses

Enter expenses for business use of your home only on line 30.

8 Advertising

8

9 Car and truck expenses
(see instructions)

9

10 Commissions and fees

10

11 Contract labor
(see instructions)

11

12 Depletion

12

13 Depreciation and section 179
expense deduction (not included
in Part III) (see instructions)

13

14 Employee benefit programs
(other than on line 19)

14

15 Insurance (other than health)

15

16 Interest:

a Mortgage (paid to banks, etc.)

16a

b Other

16b

17 Legal and professional services

17

190.

18 Office expense (see instructions)

18

19 Pension & profit-sharing plans

19

20 Rent or lease (see instructions):

20

a Vehicles, machinery, and equipment

20a

b Other business property

20b

21 Repairs and maintenance

21

450.

22 Supplies (not included in Part III)

22

23 Taxes and licenses

23

24 Travel, meals, and entertainment:

24

a Travel

24a

b Deductible meals and
entertainment (see instructions)

24b

0.

25 Utilities

25

26 Wages (less employment credits)

26

27a Other expenses (from
line 48)

27a

974.

b Reserved for future use

27b

28 Total expenses before expenses for business use of home. Add lines 8 through 27a

28

1,614.

29 Tentative profit or (loss). Subtract line 28 from line 7

29

-1,614.

30 Expenses for business use of your home. Attach Form 8829. Do not report such expenses elsewhere

30

31 Net profit or (loss). Subtract line 30 from line 29.

31

-1,614.

• If a profit, enter on both **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

If you entered an amount on line 1c, see instr. Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you must go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**. If you entered an amount on line 1c, see the instructions for line 31.

Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you must attach **Form 6198**. Your loss may be limited.

32a ☒ All investment is at risk.

32b ☐ Some investment is not at risk.

Part III Cost of Goods Sold (see instructions)

- 33 Method(s) used to value closing inventory: **a** ☐ Cost **b** ☐ Lower of cost or market **c** ☐ Other (attach explanation)

- 34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory?

If "Yes," attach explanation

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35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	MIAMI-DADE ELECTIONS
36	Purchases less cost of items withdrawn for personal use	36	
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs	39	
40	Add lines 35 through 39	40	0.
41	Inventory at end of year	41	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	0.

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

- 43 When did you place your vehicle in service for business purposes? (month, day, year) ► _____
- 44 Of the total number of miles you drove your vehicle during 2011, enter the number of miles you used your vehicle for:
- a** Business _____ **b** Commuting (see instructions) _____ **c** Other _____
- 45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No
- 46 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No
- 47a Do you have evidence to support your deduction? ☐ Yes ☐ No
- b** If "Yes," is the evidence written? ☐ Yes ☐ No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

ALARM	619.
DUES	355.
48 Total other expenses. Enter here and on line 27a	974.

**Residential Energy Efficient Property Credit** (See instructions before completing this part.)

Note. Skip lines 15 through 25 if you only have a credit carryforward from 2010.

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ELECTIONS

15	Qualified solar electric property costs		
16	Qualified solar water heating property costs		
17	Qualified small wind energy property costs		
18	Qualified geothermal heat pump property costs		
19	Add lines 15 through 18		
20	Multiply line 19 by 30% (.30)		
21a	Qualified fuel cell property. Was qualified fuel cell property installed on or in connection with your main home located in the United States? (See instructions) Caution: If you checked the "No" box, you cannot take a credit for qualified fuel cell property. Skip lines 21b through 25.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b	Print the complete address of the main home where you installed the fuel cell property.		
Number and street		Unit No.	
City, State, and ZIP code			
22	Qualified fuel cell property costs	22	
23	Multiply line 22 by 30% (.30)	23	
24	Kilowatt capacity of property on line 22 above $\times \$1,000$	24	
25	Enter the smaller of line 23 or line 24	25	
26	Credit carryforward from 2010. Enter the amount, if any, from your 2010 Form 5695, line 28	26	
27	Add lines 20, 25, and 26	27	
28	Enter the amount from Form 1040, line 46, or Form 1040NR, line 44	28	26,151.
29	1040 filers: Enter the total, if any, of your credits from Form 1040, lines 47 through 50; line 14 of this form; line 12 of the Line 11 worksheet in Pub. 972 (see instructions); Form 8396, line 9; Form 8859, line 9; Form 8834, line 23; Form 8910, line 22; Form 8936, line 15; and Schedule R, line 22. 1040NR filers: Enter the amount, if any, from Form 1040NR, lines 45 through 47; line 14 of this form; line 12 of the Line 11 worksheet in Pub. 972 (see instructions); Form 8396, line 9; Form 8859, line 9; Form 8834, line 23; Form 8910, line 22; and Form 8936, line 15.	29	300.
30	Subtract line 29 from line 28. If zero or less, enter -0- here and on line 31	30	25,851.
31	Residential energy efficient property credit. Enter the smaller of line 27 or line 30. Also include this amount on Form 1040, line 52, or Form 1040NR, line 49	31	
32	Credit carryforward to 2012. If line 31 is less than line 27, subtract line 31 from line 27	32	

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

PEDRO J GARCIA

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations **Note.** If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See instructions.

- 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☐ No
- If you answered "Yes," see instructions before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A		S			
B					
C					
D					

Passive Income and Loss		Nonpassive Income and Loss	
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562
A		709.	
B			
C			
D			
29a Totals	0.		0.
b Totals	0.	709.	0.

- 30 Add columns (g) and (i) of line 29a **30** 0.
- 31 Add columns (f), (h), and (i) of line 29b **31** (709.)
- 32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below **32** -709.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a Totals	0.		0.
b Totals	0.	0.	
35 Add columns (d) and (f) of line 34a 35 0.			
36 Add columns (c) and (e) of line 34b 36 (0.)			
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below 37 0.			

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs)—Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39 0.

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040 line 17, or Form 1040NR, line 18	41	-709.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see instructions)	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Name : PEDRO J GARCIA

ID #

Attachment to SCHEDULE A REAL ESTATE TAXES

8415 SW 47TH ST

3,802.

8420 SW 47TH ST

3,488.

Total

7,290.

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ELECTIONS

Preparer Explanation for Not Filing Electronically

OMB No. 1545-2200

▶ Attach to taxpayer's Form 1040, 1040A, 1040EZ, or Form 1041.

Attachment
Sequence No. 173

Name(s) on tax return

PEDRO J GARCIA

Taxpayer's identifying number

Three out of four taxpayers now use IRS e-file. Go to www.irs.gov/efile for details on using IRS e-file. The benefits of electronic filing include the following.

- Faster refunds
- Secure transmissions
- E-payment options
- More accurate returns
- Easier filing method
- Receipt acknowledged

Check the applicable box to indicate the reason this return is not being filed electronically. Do not check more than one box.

1 ☒ Taxpayer chose to file this return on paper.

2 ☐ The preparer received a waiver from the requirement to electronically file the tax return.

Waiver Reference Number _____ Approval Letter Date _____

3 ☐ The preparer is a member of a recognized religious group that is conscientiously opposed to filing electronically.

4 ☐ This return was rejected by IRS e-file and the reject condition could not be resolved.

Reject code: _____ Number of attempts to resolve reject: 0.

5 ☐ The preparer's e-file software package does not support Form _____ or Schedule _____ attached to this return.

6 Check the box that applies and provide additional information if requested.

a ☐ The preparer is ineligible to file electronically because IRS e-file does not accept foreign preparers without social security numbers who live and work abroad.

b ☐ The preparer is ineligible to participate in IRS e-file.

c ☐ Other: Describe below the circumstances that prevented the preparer from filing this return electronically.

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 ELECTIONS

PEDRO J. GARCIA - CAMPAIGN FUND		121	
FOR RE-ELECTION OF PROPERTY APPRAISER			
MIAMI DADE-COUNTY			
8420 S.W 47TH ST		5/23/12	
MIAMI, FL 33155		Date	
Pay to the	BORRO of County Commissioners		\$6,530.00
Order of			xx
Six thousand Five Hundred thirty		xx	Dollars
INTERCONTINENTAL BANK		Security Features Detail on Back	
5722 SW 8th Street West Miami, Florida 33144			
For	Qualification Fee		