JUDICIAL OFFICE CANDIDATE OATH									
	2012 APR 16 PH 12: 23								
	OFFICEUSEONLY								
OATH OF CANDIDA	ELECTIONS DEPARTMENT								
I, DAWN VERONICA DEMAND (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 judicial office of $(200+)$	(burt Judge,,,,,, flice) (district #) (circuit #)								
ارها <u>25 </u>									
of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the 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 with the office I seek; and I have resigned from any office 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.									
Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, 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.									
X Duen Verman Praces 1305968-4464 dawndenarochotmail.com Signature of Candidate Telephone Number Email Address									
1351 N.W. 12 Street, 2m 507 M Address City	liami, FL 33125 State ZIP Code								
Candidate's Florida Voter Registration Number (located	on your voter information card):								
* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form): DAH N VER COR NI CAH DEN AHR C									
STATE OF FLORIDA COUNTY OF <u>Miami-DAD</u>									
Sworn to (or affirmed) and subscribed before me this $\frac{16\pi}{16\pi}$ day of \underline{ApriL} , 20.12.									
Personally Known: or	Al Dia								
Produced Identification:	Signature of Notary PLANAZ Signature of Notary PLANAZ Port Type, or Stamp Commissioned Name of Notary Public EXPIRES: April 17, 2014								
Type of Identification Produced:	Bonded Thru Budget Notary Services								

FORM 6 FULL AND PUBLIC DISCL	OSURE OF	2011
Please print or type your name, mailing address, agency name, and position below : FINANCIAL INTERI	ESTSECENTE	
LAST NAME — FIRST NAME — MIDDLE NAME:	FOR OFFICE	03
DENARD DAWN VERONICA	USFIDMENT 16 PM 12:	20
MAILING ADDRESS:	1000 CUU	
136 NE 43 ST	ELECTIONSDEPART	MENT
MIAMI FL 33137 MIANI-DADE		
MIAMI FL 33137 MIAMI-DADE CITY: ZIP: COUNTY:		
STATE OF FLORIDA COURTS	ID No.	
NAME OF AGENCY :		
COUNTY COURT JUDGE GROUP 25	Conf. Code	
NAME OF OFFICE OR POSITION HELD OR SOUGHT :	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: liabilities from your <i>reported</i> assets, so please see the instructions on page 3.]		
My net worth as of <u>APRIL 1</u> , 2012 was	\$001,091	£
PART B ASSETS		
HOUSEHOLD GOODS AND PERSONAL EFFECTS: Household goods and personal effects may be reported in a lump sum if their aggregate value e if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; other household items; and vehicles for personal use. The aggregate value of my household goods and personal effects (described above) is \$	art objects; household equipmen	
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:		
DESCRIPTION OF ASSET (specific description is required - see instruction CITIBANC CHECKINE/SAVINES		VALUE OF ASSET
LOANTO CAMPAIGN ACCOUNT MY PERSONAL RESIDENCE	12	40,000
1/2 INTEREST IN RENTAL PROPERTY	-	15.000
RETIREMENT ACCOUNT TO DAMERTRADE DEFERRED COMPENSATION NATIONWIDE RETIREMENT SOLU		22,404 11,968
TOTAL BANK JOINT ACCOUNT		9,000
CHASE CHECKING/SAVINGS ACCOUNT		8,500
CHASE CHEERING / SAVINGS ACCOUNT		5,600
PART C LIABILITIES		
LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4): NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY
CITI MORTGAGE ON PERSONAL RESIDENCE		203,000
1/2 MORIGAGE ON RENTAL PROPERTY WITH WELL	SFARGO	61,276
		-
AMEX CREDIT CARD PAID OFF IN FULL MONTHLY		
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 complete complete identifying each separate source of Part D, below.	opy of your 2011 federal and amount of income	income tax ret which exceeds	turn, including all W2's, schedules, and a s \$1,000, including secondary sources of	ttachments, OR (2) file a income, by completing	a sworn state- the remainder						
I elect to file a copy of my 2011 [If you check this box and attac			s, schedules, and attachments. need not complete the remainder of Part I).]							
PRIMARY SOURCES OF INCOME (S NAME OF SOURCE OF INCOME E			ADDRESS OF SOURCE OF INCOME	AM	IOUNT						
STATE OF FLORIDA		200 E. 0	GAINES STREET	129,9	13						
		TALLAH	ASSEE, FLORIDA 323	99 ,							
TODD POSES			ST FLAGLER STREET 600, MAMI FLORIDA		000						
		Suite I									
RECONDARY POUROES OF MOST	E Major austantant	te oto efferi	inassas owned by reporting parson	instructions on page 51							
SECONDARY SOURCES OF INCOMI NAME OF	E [Major customers, clier NAME OF MAJOR S		sinesses owned by reporting personsee ADDRESS	PRINCIPAL BL							
BUSINESS ENTITY	OF BUSINESS' II		OF SOURCE	ACTIVITY OF S							
N/A											
				EC	jači jako						
		OPPOT		O R							
PART			D BUSINESSES [Instructions on p	BUSINESS ENT							
NAME OF	BUSINESS ENTITY	# 1	BUSINESS ENTITY # 2	BOSINESS ENT	<u>ITY # 3</u>						
ADDRESS OF	N/A			ART	1						
BUSINESS ENTITY				THE N	enter a second						
PRINCIPAL BUSINESS											
POSITION HELD WITH ENTITY				-,							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS											
NATURE OF MY OWNERSHIP INTEREST											
IF ANY OF PARTS A TH	HROUGH E ARE CO	ONTINUED	ON A SEPARATE SHEET, PLEA	SE CHECK HERE							
OAT	H	STA COL	STATE OF FLORIDA MIAMI- DADE								
I, the person whose name appears at	the	Swo	orn to (or affirmed) and subscribed before	me this	ay of						
beginning of this form, do depose on o			a 1								
and say that the information disclosed		1.	ADGE 2012 by DAWN DENARO								
and any attachments hereto is true, ac	ccurate,		GAA. ().								
and complete.		(Sig	(Signature of Notary PublicState of Florida)								
			STELA DIAZ								
SIGNATURE OF REPORTING OFFIC	A V CIONTE		(Print, Type, Commission on p58350 Notary Public) EXPIRES: April 17, 2014 Personally Kitowe								
		Туре	e 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.											

MIAMIDADE		OFFICIAL RECEIPT MIAMI-DADE COUNTY-FLORIDA										No.6741134												
	R	RECEIVED FROM Dawn V: Demono										1	Date	4 MON	/		6	_/	12 YEAR					
	Address 25 Biscoryne Blyd, Ste 2350									_	Сазн	\$	5				·							
		Mi	am	11		/	STR	EET AD	DRESS 	FL		_	33/	'31	_	Снеска	\$	5	5	37	1	2	0_	
AMOUNT OF	Address <u>25</u> <u>Biscayme</u> <u>Blyd</u> <u>Ste</u> <u>2350</u> <u>STREET ADDRESS</u> <u>Miami</u> <u>CITY</u> <u>STATE</u> <u>33/31</u> AMOUNT OF: <u>FiveThousond Three Hundred Sevent</u> Dollars, AND <u>Twenty</u> <u>CENTS</u> FOR PAYMENT OF: <u>Qualifying Tee</u> <u>judge</u> <u>yroup 25</u> THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUT DEPT.: <u>Electiona</u> <u>By:</u> <u>A. Vame</u>								rs <i>'</i>	Total	Ş	5	.5	37	1	2	- O							
FOR PAYMENT OF: Gustifying Fre- judge Group 25																								
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			F	IVE	THC)05	AND	TH	LEE	HU	UDK	ŧD	SEVE	N	y-01	t /	DO	LLARS		Included. Details on Back				
	PAY TO THE BOHRD OF COUNTY COMPENSIONELS \$ 5,371.20 FIVE THOUSAND THREE HUNDRED SEVENTY ONE 20 citibank																							
		CITIBANK, N.A. BR. #530 120 SOUTH BISCAYNE BOULEVARD MIAMI, FL 33131 MEMO <u>Qualifying fre</u>																						
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