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Access to Handbook and the 2012 JUN -4 PM 12: 03  
Election Laws of the State of Florida

MIAMI-DADE  
ELECTIONS

Candidate/Chairperson:

ESTEBAN

L.

BOVO, JR.

First Name

Middle Name

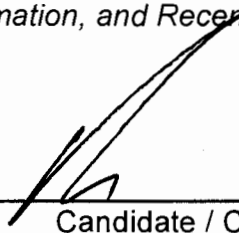
Last Name

MIAMI-DADE COUNTY COMMISSION, DISTRICT 13

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

- Candidate Qualifying Handbook (<http://www.miamidade.gov/elections/candidate.asp>)  
*Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.*
- Political Committee Handbook (<http://www.miamidade.gov/elections/pacs.asp>)  
*Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.*

Acknowledged by:   
Candidate / Chairperson Signature

Date: 6-2-12

Primary Telephone Number: 305-318-8741

Alternate Telephone Number: 305-445-0777

E-mail address: ESTEBANBOVOJR@AOL.COM

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Campaign Treasurer's Report  
Electronic Filing Requirements  
for Miami-Dade County



MIAMI-DADE ELECTIONS

Candidate (office sought): MIAMI-DADE COUNTY COMMISSION, DISTRICT 13

Candidate's Florida Voter Registration Number: 109801210

Political Committee: \_\_\_\_\_

Party Executive Committee: \_\_\_\_\_

Other: \_\_\_\_\_

I, ESTEBAN L. BOVO, JR.  
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.

                     6-2-12  
 Signature of Candidate or Chairperson                      Date

Day Time Telephone No: 305-318-8741

Email Address: ESTEBANBOVOJR@AOL.COM

*This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.*

**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:

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Driver's License       | <input type="checkbox"/> Utility Bill                |
| <input checked="" type="checkbox"/> Voter Information Card | <input type="checkbox"/> Homestead Exemption Receipt |
| <input type="checkbox"/> Property Tax Receipt              | <input type="checkbox"/> Lease Agreement             |

**OATH OF CANDIDATE**

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

I, ESTEBAN BOVO

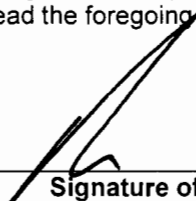
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT - NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of MIAMI-DADE COUNTY COMMISSIONER 13  
(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 of Candidate

(305) 318-8741

Telephone Number

estebanbovojr@aol.com

Email Address

765 WEST 76 STREET

Address

HIALEAH

City

FL

State

33014

Zip Code

Candidate's Florida Voter Registration Number (located on your voter information card): 109804210

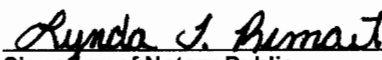
STATE OF FLORIDA  
COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 2 day of June, 2012

Personally Known: \_\_\_\_\_ or

Produced Identification:

Type of Identification Produced:  
[REDACTED]

  
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public



**LYNDA T RIMART**

MY COMMISSION # DD893220

EXPIRES May 26, 2013

(407) 398-0153

FloridaNotaryService.com

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ELECTIONS  
2012 JUN -14 PM 3:57

# FORM 6 FULL AND PUBLIC DISCLOSURE OF

# 2011

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

## FINANCIAL INTERESTS

LAST NAME — FIRST NAME — MIDDLE NAME:

BOVO JR. ESTEBAN L.

FOR OFFICE USE ONLY:

MAILING ADDRESS:

765 WEST 76 STREET

ID Code

CITY:

ZIP:

COUNTY:

HIALEAH, FL

33014

MIAMI-DADE

ID No.

NAME OF AGENCY:

MIAMI-DADE COUNTY COMMISSION, DISTRICT #13

Ccnf. Code

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

COUNTY COMMISSIONER

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 MARCH 31, 20 12 was \$ -26,515.

### 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 \$ 80,000

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

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
CHASE CHECKING/SAVINGS ACCOUNT-14045 NW 67 AVENUE, MIAMI LAKES, FL 33014	5,200
PRIMARY RESIDENCE - 765 WEST 76 STREET, HIALEAH, FL 33014	326,614
SECOND RESIDENCE - 17255 SW 85 AVENUE, #449, PALMETTO BAY, FL 33157	33,920

### PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
MORTGAGES - SEE ATTACHMENT	456,674
LOANS PAYABLE/OTHER LIABILITIES - SEE ATTACHMENT	15,575

#### 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 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	111 NW 1 STEET, MIAMI, FL 33128	26,040
MIAMI CHILDREN'S HOSPITAL	3100 SW 62 AVENUE, MIAMI, FL 33155	89,877
STATE OF FLORIDA	200 E GAINES STREET, TALLAHASSEE, FL 32399	6,855
ELB BUSINESS & COMMUNITY CONSULTING, Inc	765 WEST 76 STREET, HIALEAH, FL 33014	15,000

**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	N/A	N/A	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	N/A	N/A	N/A
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

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 MIAMI-DADE  
 ELECTIONS

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

**OATH**

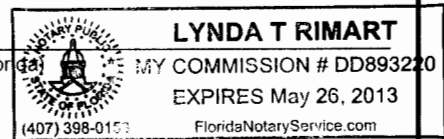
I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

STATE OF FLORIDA  
 COUNTY OF miami-dade

Sworn to (or affirmed) and subscribed before me this 2 day of

June, 20 12 by Esteban L. Bovo, Jr.

Lynda J. Rimart  
 (Signature of Notary Public--State of Florida)



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

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

Personally Known \_\_\_\_\_ OR Produced Identification

Type of Identification Produced [REDACTED]

**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.

ESTEBAN L BOVO JR.  
FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS  
FORM 6  
2011  
ATTACHMENT

**PART C - LIABILITIES**

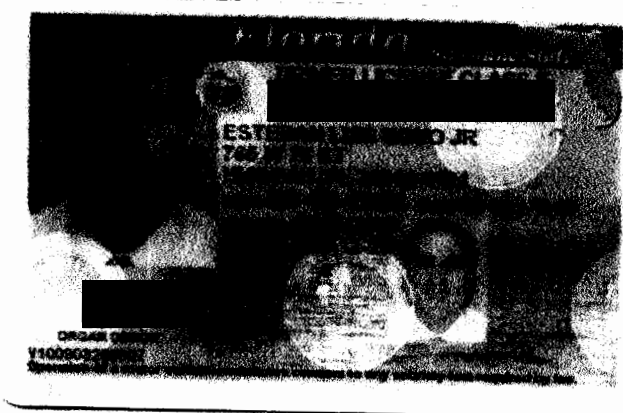
MORTGAGES

	<u>AMOUNT DUE</u>
PRIMARY RESIDENCE - CENTURY HOME MORTGAGE 801 JOHN BARROW #1, LITTLE ROCK, AK 72205	\$220,036
PRIMARY RESIDENCE HELOC - BAC HOME FINANCING PO BOX 660625, DALLAS, TX 75266	\$111,119
SECONDARY RESIDENCE - BAC HOME FINANCING PO BOX 660694, DALLAS, TX 75266	\$125,519
TOTAL	<u>\$456,674</u>

LOANS PAYABLE/OTHER LIABILITIES

	<u>AMOUNT DUE</u>
AUTO - CARMAX AUTO FINANCING PO BOX 3174, MILWAUKEE, WI 53201	\$9,875
CREDIT - AMERICAN EXPRESS BLUE, 2965 WEST CORPORATE LAKES BLVD, WESTON, FL 33331	\$3,600
CREDIT - BEST BUY PO BOX 5238, CAROL STREAM, IL 60197	\$2,100
TOTAL	<u>\$15,575</u>

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MIAMI-DADE  
ELECTIONS



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MIAMI-DADE  
ELECTIONS



**Voter Information Card**  
Miami-Dade County, FL

Tarjeta de informacion del elector  
Condado de Miami-Dade, FL

**Esteban Luis Bovo JR**  
765 W 76Th St  
Hialeah FL 33014

**Kat Enfomasyon Votè**  
Konte Miami-Dade, FL

ISSUED  
EMISSION  
ENPRIME  
10/31/11

**Bring photo identification  
when voting.**

Para votar, presente una  
identificación con fotografía.

Tranpri pote yon pyès idantifikasyon  
ki gen foto w sou li lè w'ap vin vote.

Registration No.  
Núm. de inscripción  
Nim. Enskripsyon

109801210

Voting Location | Ubicación de la votación | Lokal Biwo Vòt

**The Salvation Army**  
7450 W 4 Ave

Precinct No. Núm. del recinto Nim. Biwo Vòt	Identification Data Datos de identificación Enfo. Idantifikasyon	Registration Date Fecha de inscripción Dat Enskripsyon
311	6/12/1962	5/29/1980

Party Affiliation | Afiliación partidista | Pati Politik

REPUBLICAN PARTY OF FLORIDA

**Lester Sola**

Supervisor of Elections | Supervisor de Elecciones | Sipèvizè Eleksyon

You are eligible to vote for the representatives from the districts listed below.  
Ud. puede votar por los representantes de los distritos enumerados abajo.  
W elijib pou w vote pou reprezantan ki nan distri ki ekri anba la vo.

Congress Congreso Kongre	State Senate Senado Estatal Sena Eta a	State House Cámara Estatal Lacham Et a
21	40	110
County Commission Comisión del Condado Komisyon Konte	School Board Junta Escolar Asamble Edikasyon	Community Council Consejo Comunitario Konsèy Kominotè
13	4	0
Municipal   Municipal   Minisipalite		
HIALEAH		





OFFICIAL RECEIPT  
MIAMI-DADE COUNTY-FLORIDA

No. 6741211

RECEIVED FROM Esteban Bovo

DATE 6 / 4 / 12  
MONTH DAY YEAR

ADDRESS 765 W 76 ST  
STREET ADDRESS

CASH \$ \_\_\_\_\_

Hialeah CITY FL STATE 33014 ZIP

CHECKS \$ 360 . 00

AMOUNT OF: Three Hundred Sixty DOLLARS, AND 00/100 CENTS

TOTAL \$ 360 . 00

FOR PAYMENT OF: Qualifying Fee-Commission District 13

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

DEPT.: Elections

By: Anne Gnessa Innocent

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

**ESTEBAN L BOVO JR CAMPAIGN ACCOUNT**  
765 W 76 ST  
HIALEAH, FL 33014

1012  
63-915/660  
040

DATE 6/4/12

PAY TO THE ORDER OF Board of County Commissioners \$ 360.<sup>00</sup>/<sub>100</sub>

THREE HUNDRED SIXTY DOLLARS

**TOTALBANK** MAIN OFFICE BRANCH 40  
totalbank.com 2720 Coral Way  
Miami, FL 33145-3271

FOR COUNTY COMMISSIONER QUALIFYING FEE DISTRICT 13