

**CANDIDATE OATH –
SCHOOL BOARD
NONPARTISAN OFFICE**

Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in candidate

OFFICE USE ONLY

Candidate Oath

(Sections 99.021(1)(a) and 105.031, Florida Statutes)

I, MARTA PEREZ

(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 nonpartisan office of MIAMI DADE COUNTY SCHOOL BOARD, 8,
(Office) (District #)

, I am a qualified elector of MIAMI-DADE County, Florida;
(Circuit #) (Group or Seat #)

I am qualified 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.

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 school board 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 109179517

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.]

m AA r - t aa p EH - reh s

X Marta Perez (786) 426-8430

marta774@bellsouth.net

Signature of Candidate

Telephone Number

Email Address

1208 AGUILA AVENUE

CORAL GABLES

FL

33134

Address

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF miami-Dade

Lynda T. Rimart
Signature of Notary Public

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

Sworn to (or affirmed) and subscribed before me this 12
day of June, 20 18.

Personally Known: _____ or Produced Identification: ✓

Type of Identification Produced: FL Drivers License



FORM 6

FULL AND PUBLIC DISCLOSURE
OF FINANCIAL INTERESTS

2017

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

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:

PEREZ MARTA

2018 JUN 13 PM 12: 32

MAILING ADDRESS:

1208 AGUILA AVENUE

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

CITY :

CORAL GABLES

ZIP :

33134

COUNTY :

MIAMI-DADE

NAME OF AGENCY :

MIAMI DADE COUNTY SCHOOL BOARD

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

MIAMI DADE COUNTY SCHOOL BOARD MEMBER, district 8

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, 2017 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 DECEMBER 31, 20 17 was \$ 2,976,015.00.

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 \$ 50,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

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

VALUE OF ASSET

SEE ATTACHED

2,926,015.00

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

N/A

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

N/A

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 2017 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 2017 federal income tax return and all W2's, schedules, and attachments.
[If you check this box and attach a copy of your 2017 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
SCHOOL BOARD OF MIAMI DADE CO	1450 NE 2 AVE, MIAMI, FL 33132	44304.00
MML INVESTORS-dividends/cap gains	PO BOX 145462, CINCINNATI, OH 45250	28807.00/32904.00

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
N/A			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	MP INVESTM PROP LLC	VALPEZ INVESTMENT LLC	
ADDRESS OF BUSINESS ENTITY	1208 AGUILA AVE, CORAL GABLES, FL 33134	1208 AGUILA AVE, CORAL GABLES, FL 33134	
PRINCIPAL BUSINESS ACTIVITY	REAL ESTATE	REAL ESTATE	
POSITION HELD WITH ENTITY	MEMBER	MEMBER	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%	100%	
NATURE OF MY OWNERSHIP INTEREST	INVESTOR/OWNER	INVESTOR/OWNER	

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 miami - Dade

Sworn to (or affirmed) and subscribed before me this 12 day of

June, 20 18 by Marta B. Perez

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

Lynda T. Rimart

(Print, Type, or Stamp Commissioned Name of Notary Public) **LYNDA T RIMART**
MY COMMISSION # GG083613
EXPIRES June 26, 2021

Personally Known _____ OR Produced Identification ☒

Type of Identification Produced FL Drivers License

Marta Perez
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

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 ☒

PEREZ, MARTA
FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTEREST
FORM 6
12/31/2017

RECEIVED

2018 JUN 13 PM 12:33

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

PART B-ASSETS:

RESIDENCE-1208 AGUILA AVE, CORAL GABLES FL	480,000
RETIREMENT ACCOUNT- NATIONWIDE	395,029
ANNUITIES, IRA-PRUDENTIAL	229,761
MP INVESTMENT PROPERTIES, LLC	250,000
VALPEZ INVESTMENT, LLC	250,000
FRANKLIN TEMPLETON INVESTMENTS-PREPAID COLLEGE	12,171
AUTOMOBILE	12,000
THE WALT DISNEY COMPANY-15 SHARES	1,613
INVESTMENT ACCOUNT-MML INVESTORS SERVICES LLC:	
MONEY MARKET-FIDELITY GOVT MMKT CAPITAL RESERVES	27,797
74 SH ACCENTURE PLC	11,329
132 SH AMERISOURCEBERGEN	12,120
96 SH AUTOMATIC DATA PROCESSING	11,250
186 SH BEST BUY	12,735
129 SH C H ROBINSON WORLDWIDE INC	11,493
223 SH CAMPBELL SOUP	10,729
79 SH CLOROX CO	11,751
203 SH DELTA AIRLINES	11,368
214 SH FASTENAL CO	11,704
83 SH F5 NETWORKS INC	10,891
344 SH GAP INC	11,717
100 SH HERSHEY CO	11,351
101 SH HUNT JB TRANS SERV	11,613
132 SH LOWES COS INC COM	12,268
105 SH LYONDELLBASELL INDUSTRIES	11,584
73 SH MASTERCARD	11,049
188 SH MICHAEL KORRS HOLDINGS LTD	11,835
59 SH NETFLIX	11,326
243 SH NORDSTRON	11,513
166 SH PAYCHEX INC	11,301
195 SH ROBERT HALF INTL	10,830
143 SH ROSS STORES INC	11,476
181 SH SOUTHWEST AIRLNS	11,847
191 SH STARBUCKS CORP	10,969
114 SH TEXAS INSTRUMENTS INC	11,906
145 SH TJX COS INC NY	11,087
160 SH TRACTOR SUPPLY CO	11,960
52 SH ULTA BEAUTY INC	11,630
558 SH WESTERN UNION CO	10,608

46 SH 3M COMPANY	10,827	
2354.622 SEI EMERGING MARKET EQUITY	30,445	
9,227,234 SEI INTERNATIONAL EQUITY	107,405	
5864.271 SEI TAX MANAGED LARGE CAP	149,304	
1584.058 SEI TAX MANAGED SMALL CAP	36,275	
14541.317 LORD ABBETT BOND DEBENTURE FUND CL F	119,820	
27,208.984 LORD ABBETT SHORT DURATION INCOME CL F	115,638	
21571.61 VOYA GNMA INCOME CLASS W	181,417	
1080 SECTOR SPDR TR SHS BEN INT CONSUMER	61,441	
758 SELECT SECTOR SPDR TR HEALTH CARE	62,671	
1554 SH ISHARES TR S&P US PFD STK	59,161	
SUB-TOTAL MML INVESTORS SERVICES		<u>1,295,441</u>
TOTAL ASSETS		<u><u>2,926,015</u></u>

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 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 7722305

RECEIVED FROM Marta Perez
ADDRESS 2600 S. Douglas Rd Ste 900
Coral Gables CITY FL STATE 33134 ZIP

DATE 06 / 12 / 18
MONTH DAY YEAR

CASH \$
CHECKS \$ 1777 . 72
TOTAL \$ 1777 . 72

AMOUNT OF: one thousand seven hundred DOLLARS, AND seventy two CENTS
seventy seven

FOR PAYMENT OF: Qualifying Fee School Board Member District 8

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT
DEPT.: elections By: Will Castro

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

MARTA PEREZ CAMPAIGN
2600 S DOUGLAS RD STE 900
CORAL GABLES, FL 33134

1012



PAY TO THE ORDER OF Miami Dade County

DATE 6/12/18

One thousand seven hundred seventy-seven & 72/100 DOLLARS

FOR Qualifying Fee SUNTRUST ACH RT Miami Dade County School Board District #8

[Signature]

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