

**CANDIDATE OATH -
JUDICIAL OFFICE**

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

Write-in candidate

RECEIVED

2018 MAY -1 PM 5:01

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

OFFICE USE ONLY

Candidate Oath

(Section 105.031, Florida Statutes)

I, Tanya Teanette Brinkley

(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 judicial office of

County Court Judge

(Office)

(District #)

(Circuit #)

28

; my legal residence is

Miami-Dade

County, Florida; I am a qualified elector

(Group #)

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.

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

109471178

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.]

TAWN-yuh GEE-net BRINK-lee

Signature of _____

Phone Number _____

Email Address _____

Address _____

State _____

ZIP Code _____

STATE OF FLORIDA

COUNTY OF Miami-Dade

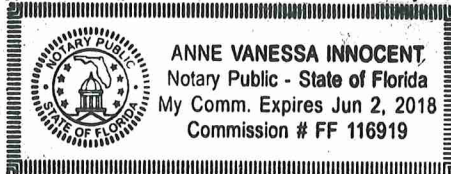
Signature of Notary Public

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

Sworn to (or affirmed) and subscribed before me this 1st day of May, 2018.

Personally Known: _____ or Produced Identification: _____

Type of Identification Produced: Florida Driver License



FORM 6

FULL AND PUBLIC DISCLOSURE

2017

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

OF FINANCIAL INTERESTS

RECEIVED FOR OFFICE USE ONLY:

2018 MAY -1 PM 5:01

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

LAST NAME — FIRST NAME — MIDDLE NAME:

Brinkley, Tanya Jeanette

MAILING ADDRESS:

175 NW 1st Avenue

Suite 2820

CITY :

Miami

ZIP :

33128

COUNTY :

Miami-Dade

NAME OF AGENCY :

11th Judicial Circuit

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

County Judge Group 28

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 May 1, 20 18 was \$ 1,557,909.

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 \$ 105,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Real Properties (Miami, FL/Miami, FL)	710,000/450,000
Real Properties (El Portal, FL/Chilmark, MA)	675,000/75,000
Trust (BNY Mellon - Robert Gill Walker Trust)	223,077
Bank Accounts (Bank of America-Personal Accts./Loan to Tanya Brinkley Campaign Acct.)	258,572/227,000

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Nationstar Home Mortgage, 8950 Cypress Blvd., Coppell, TX 75019	373,646
Pentagon Federal Credit Union, Box 1432, Alexandria, VA 22313	399,947
Department of Education, P.O. Box 530210, Atlanta, GA 30353	292,147

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
State of Florida	Dept of Financial Svcs., Tallahassee, FL 32399	151,822
Rental Income	Miami, Florida <i>Address protected</i>	30,000

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
<i>N/A</i>			

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	<i>N/A</i>		
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

STATE OF FLORIDA
 COUNTY OF Miami-Dade

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.

Sworn to (or affirmed) and subscribed before me this 1st day of

May, 2018 by Tanya Brinkley

(Signature of Notary Public - State of Florida) ALIEN L. SIMPKINS
 FF 993474

(Print, Type, or State-Commissioned Name of Notary Public)
 EXPIRES: August 13, 2020
 Bonded Through Budget Notary Services

Personally Known OR Produced Identification _____

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

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



OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 7359963

RECEIVED FROM Tanya Brinkley
ADDRESS 6468 Manor Ln
South Miami CITY FL STATE 33143 ZIP

DATE 5 / 1 / 18
MONTH DAY YEAR

CASH \$ _____

CHECKS \$ 5,520.80

AMOUNT OF: Five Thousand Five Hundred Twenty DOLLARS, AND 80 CENTS

TOTAL \$ 5,520.80

FOR PAYMENT OF: Qualifying Fee - County Court Judge Group 28

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

DEPT.: Elections By: [Signature]

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

JUDGE TANYA BRINKLEY CAMPAIGN ACCOUNT 1010

C/O KAREN JONES
6468 MANOR LN
SOUTH MIAMI FL 33143-4645

DATE 4/16/18

PAY TO THE ORDER OF Miami-Dade County \$ 5,520.80

five thousand five hundred twenty dollars + 80/100 DOLLARS

Bank of America

ACH R/T 063100277

FOR Qualifying Fee (2025)
County Court Judge
Group 28

[Signature] MP

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ELECTIONS DEPARTMENT