## **CANDIDATE OATH -SCHOOL BOARD NONPARTISAN OFFICE**

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

Write-in candidate

## RECEIVED

2020 JUN 11 PM 5: 24 2020 AUR 1

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

8				OFFICE USE ONLY				
Candidate Oath								
	(Sections 99.021(1)(a) and 105.031, Florida Statutes)							
١,	Russ Rywell							
	(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	am a candidate for the nonpartisan office of Miami-Dade School Board , 3 ,							
			(Office)	(District #)				
	, ;Iam 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.								
Flo	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.							
Can	didate's Florida Voter Registration Nun	nber (located on your	voter information card):110084187					
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.]  R-US RYE-WELL								
X ( ) 786-556-9203 Russ.Rywell@gmail.com								
Sig	gnature of Candidate Tel	ephone Number	Email Address					
49	95 Delaware Ave / M	liami Beach	FL 3	33140				
Ad	dress Cit	у	State	P Code				
STATE OF FLORIDA								
	DUNTY OF Miamipade		Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notal	y Public below:				
Sw onl Pe	orn to (or affirmed) and subscribed before me by phy ine presence this day of or Produced Identification: or Identification Produced:	12026.	ALFONSO JOSE ESCORCIA JR Commission # GG 32799 My Commission Expires September 22, 2020	N STATE OF THE STA				

FORM 6 FULL AND PUBLIC DISCL		2019			
Please print or type your name, mailing address, agency name, and position below:	ESTS RECEI	OFFICE USE ONLY:			
LAST NAME — FIRST NAME — MIDDLE NAME:					
Rywell Russell	2020 JUN 11	PM 5: 24 2020 JUN			
MAILING ADDRESS: 4955 Delaware Avenue		The state of the s			
	MIAMI-DADE ELECTIONS DEI	PARTMENT			
CITY: ZIP: COUNTY:					
Miami Beach 33140 Miami-Dade		2			
NAME OF AGENCY: Miami-Dade County School System					
NAME OF OFFICE OR POSITION HELD OR SOUGHT: Miami-Dade County School Board Position 3					
CHECK IF THIS IS A FILING BY A CANDIDATE	1				
PART A NET WORTH	a current data (Nata: N	lot worth is not sal			
Please enter the value of your net worth as of December 31, 2019 or a more culated by subtracting your reported liabilities from your reported assets, so	e current date. [Note: Note: Note: N	ons on page 3.1			
		5 1			
My net worth as of December 31, 20 19 was \$	\$13,293,900.08	· ·			
		BATTEL CONTRACTOR STATE			
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 $\$$	10,000.00	· · · · · · · · · · · · · · · · · · ·			
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:  DESCRIPTION OF ASSET (specific description is required - see instruct	ions p.4)	VALUE OF ASSET			
See Attached - Part B		\$14,518,150.08			
PART C LIABILITIES					
LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):					
NAME AND ADDRESS OF CREDITOR	1.00	AMOUNT OF LIABILITY			
Home Mortgage - 4955 Delaware Avenue, IBERTA BANK 400	Arthur Godfrey Rd	\$834,190.00			
Home Mortgage - 4955 Delaware Avenue, IBERTA BANK 400, Man. Morgan Stanley, N.A., 20807 Biscayne BLVD 5+146+16 Aventura FL	33180 - L, 32190	\$400,000.00			
	X20				
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY			
N/A					
	The second secon				

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 2019 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.						
	l elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments. [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]					
PRIMARY SOURCES OF INCOM		ge 5):	ADDDESS OF SOURCE OF INCOME	I MANUT		
NAME OF SOURCE OF INCO		1450 NE	ADDRESS OF SOURCE OF INCOME			
School Board of Miami-D		1450 NE	2nd Ave, Miami, FL 33132	\$51,075.37		
See Attached-Part D (1/2)				\$214,870.58		
			ousinesses owned by reporting persons			
NAME OF BUSINESS ENTITY	NAME OF MAJOR OF BUSINESS		ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
See Attached-Part D (2/2)						
PA	RT E INTERESTS II	SPECIFIE	ED BUSINESSES [Instructions on ]	nage 6]		
***	BUSINESS ENTITY:		BUSINESS ENTITY # 2	BUSINESS ENTITY#3		
NAME OF BUSINESS ENTITY	NIA		7			
ADDRESS OF	2 / /			2020 ELEC		
BUSINESS ENTITY PRINCIPAL BUSINESS			7			
ACTIVITY POSITION HELD				0. 2		
WITH ENTITY				S DEED STATE		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				PA C		
NATURE OF MY OWNERSHIP INTEREST				EEC 5: DUN RTN		
		PART F -	TRAINING	⊒≺ 🗜		
For officers	s required to complete	annual eth	nics training pursuant to section	112.3142, F.S.		
<u> </u>	CERTIFY THAT I H	AVE CON	IPLETED THE REQUIRED T	RAINING.		
OA	TH		E OF FLORIDA			
			NTY OF Miami-Dade			
I, the person whose name appears at the Sworn to (or affirmed) and subscribed before me by means of beginning of this form, do depose on oath or affirmation physical presence or online notarization, this 1 day of						
and say that the information disc	Elitoratic Stage #ESE year 27 over \$10 months in cut filting of the year 15 tomer	CIA IR II TO	ine 2020 miRa	ssellRywell.		
and any attachments hereto is true; accurate sinon # GG 32799						
and complete.  My Commission Expires September 22, 2020 (Signature of Notary Public-State of Florida)						
Alfonso Escorcia						
the sull the but	(Print, Type, or Stamp Commissioned Name of Notary Public)					
SIGNATURE OF REPORTING	SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE  Personally Known OR Produced Identification					
			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, MCNAR KORN-ESG: , 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.						
June 11, 2020						
Signature  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						
I MILL OF LAKISA	LINGUGII E AKE CC	HILITOED	OR A SELARALE SHEET, PLE	AGE CHECK HERE		

CE FORM 6 - Effective January 1, 2020 Incorporated by reference in Rule 34-8.002(1), F.A.C.

Name	Value as of
Name	12/31/2019
Bursa Malaysia	24,770.99
Capital One	5,674.89
CGM Focus Fund	59,654.09
CGM Focus Fund- Inherited IRA	7,277.35
CGM Realty Fund	33,613.17
CGM Realty Fund-Inherited IRA	7,880.73
Citibank MYR	10,155.00
Fidelity '	1,083,034.08
Iberia Bank	4,237.53
Morgan Stanley	1,263.37
Morgan Stanley - IRA	967,827.02
Morgan Stanley - IRA	1,024,410.11
Morgan Stanley:	5,288,747.47
Morgan Stanley Inherited IRA	326,056.11
RBC Funds	27,418.57
Singapore-Citi	756.48
The Central Depository-SGX	1,174.71
401(K) TIAA-Cref	180,987.63
529 Account	81,816.63
Tufts University Tuition Stablization Program	200,634.00
4955 Delaware Ave, Miami Beach, FL 33140	1,201,251.00
24 Brushy Neck Lane, Westhampton, NY 11977	1,418,500.00
2014 Ford Explorer Limited	10,791.00
2016 Tesla Model S 90D	46,195.00
Unclaimed Property (FL & MI)	13,616.82
Rose Rosman Irrevocavle Trust	11,496.40
Rosman Grandchildren Trust UAD 5/8/2004 FBO Russell Rywell Morgan Stanley	847,049.34
Ros-Ry Management Co, LLC - 14.29%	101,129.19
Rywell Associates LP - 49.5%	1,515,424.09
Rywell Management Corp - 50%	15,307.31
Total Assets Part B	\$ 14,518,150.08

MIAMI-DADE COUNTY
ELECTIONS OF PARTMEN

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Income Source	2019 Income*	
Citibank Malaysia - Dividends	1,158.00	
Fidelity - Capital Gains	3,975.07	
Fidelity - Dividends	23,319.70	
Morgan Stanley - Capital Gains	36,125.89	
Morgan Stanley - Dividends & Interest	60,064.52	
Morgan Stanley - Inherited IRA	9,307.18	
RBC Funds - Dividends & Capital Gain Distributions	1,723.90	
Rosman Grandchildren Trust UAD 5/8/2004 FBO Russell Rywell	17,721.48	
Ros-Ry Management Co, LLC	6,891.13	2019 Projected Income, K-1 not received
Rywell Associates LP	45,108.71	2019 Projected Income, K-1 not received
24 Brushy Neck Lane, Westhampton, NY 11977	9,475.00	\$9,475 gross rent, no profit after expenses
Total Part D Primary Source of Income	214,870.58	

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Income Source	2019 Income*	
Ros-Ry Management Co, LLC (14.29% Partner)		
Tenant:		
Costa Farms, LLC		
21800 SW 162nd Ave, Miami FL 33170		
Wholesale Plant Nursery		
Gross Income Paid to Partnership:	45,996.00	
Rywell Associates LP (49.5% Partner)		
Tenant:		
Costa Farms, LLC		
21800 SW 162nd Ave, Miami FL 33170		
Wholesale Plant Nursery		
Gross Income Paid to Partnership:	86,400.00	
Tenant:		
Spirit and Truth Ministries		
89655 Overseas Hwy, Tavernier, FL 33070		
Church		
Gross Income Paid to Partnership:	13,800.00	
Rywell Management Corp (50% Shareholder)		
1% Partner of Rywell Associates LP	Income under \$1,000	
All income allocated to partner or shareholder rep	orted under primary	souces of income

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DOUBLING FOREST



## OFFICIAL RECEIPT MIAMI-DADE COUNTY-FLORIDA

No.7900242

COUNTY							
	RECEIVED FROM Russ	Rywell		DATE	G / II	12020 Y YEAR	
	ADDRESS 2929 5	w 3rd Ave Ste	220	CASH	S		
	Miami	STREET ADDRESS	33129		· /	195 68	
	CITY	STATE	ZIP	CHECKS	*		
AMOUNT OF:	meThousand Seven H.	undered Dollars, AND S	ixty Eight CENTS	TOTAL	\$	795.68	
FOR PAYMENT	OF: Gurlifying F.	ee- School Bo	and Distri	ct.3			
THIS RECEIF	T NOT VALID UNLESS D		_	HORIZED	EMPLOYEE (	OF DEPARTMENT	
DEPT .: Ele	ctions		BY: Allane	no di	nnoan	<del>/</del>	
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