

MIAMI-DADE COUNTY
CANDIDATE OATH –
NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

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

Write-in candidate

OFFICE USE ONLY

Proof of residency provided:

Driver's License

Voter Information Card

Property Tax Receipt

Utility Bill

Homestead Exemption Receipt

Lease Agreement

CANDIDATE OATH

(Section 99.021, Florida Statutes)

I, Pedro J. Garcia

(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 Property Appraiser (Office) _____ (District/Group/Seat #)

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; 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.

I affirm that I am a resident of Miami-Dade County, meet the minimum residency requirements for this office, and 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 108986776

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.]

PEDRO GARCIA

X [Signature] (786) 777-8881 PJGARCIAPA@gmail.com
Signature of Candidate Telephone Number Email Address
8420 S.W. 47 Street Miami Florida 33155
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Dade

Sworn to (or affirmed) and subscribed before me by physical or
online presence this 7th day of May, 2020.

Personally Known: or

Produced Identification: _____


Type of Identification Produced: _____



Veronica Rubert
COMMISSION #66014922
EXPIRES: July 24, 2020
Bonded Thru Aaron Notary

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

Florida *The Sunshine State*
DRIVER LICENSE CLASS E



PEDRO JUAN GARCIA
 8420 SW 47TH ST
 MIAMI, FL 33155-5407
 DOB: 10-02-1937 SEX: M
 ISSUED: 08-28-2017 HGT: 6-00
 EXPIRES: 10-02-2025
 REST:
 ENDORSE:

PJG

SAFE DRIVER
 Operation of a motor vehicle constitutes consent to any sobriety test required by law.



Voter Information Card
 Miami-Dade County, FL
 Tarjeta de Información del Elector
 Condado de Miami-Dade, FL

Pedro J Garcia
 8420 SW 47Th St
 Miami FL 33155

Kat Enfòmasyon Votè
 Konte Miami-Dade, FL

ISSUED
 EMITIDA
 ENPRIME

09/16/15

Bring photo identification when voting.

Para votar, presente una identificación con fotografía.

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

Registration No.
 Núm. de Inscripción
 Nim. Enskripsyon

108986776

Voting Location | Centro de Votación | Lokal Biwo Vòt
Tropical Park Community Center
 7900 SW 40 St

Precinct No. Núm. del Recinto Nim. Biwo Vòt	Date of Birth Fecha de Nacimiento Dat Nesans	Registration Date Fecha de Inscripción Dat Enskripsyon
716	10/2/1937	9/22/1969

Party Affiliation | Afiliación Partidista | Pati Politik

REPUBLICAN PARTY OF FLORIDA

Penelope Townsley

Supervisor of Elections | Supervisora 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 distrik ki ekri anba la yo.

Congress Congreso Kongrè 27	State Senate Senado Estatal Sena Eta a 40	State House Cámara Estatal Lacham Eta a 115
County Commission Comisión del Condado Komisyon Konte 10	School Board Junta Escolar Asanble Edikasyon 6	Community Council Consejo Comunitario Konsèy Kominotè 10

Municipality | Municipio | Minisipalite
UNINCORPORATED M-D



RECEIVED

2020 MAY 12 AM 11:48

MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

OF FINANCIAL INTERESTS

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

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:
 Garcia Pedro J.

MAILING ADDRESS:
 8420 S.W. 47th Street

CITY: ZIP: COUNTY:
 Miami 33155 Miami-Dade

NAME OF AGENCY:
 Elected Officer * *Miami-Dade*

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
 Property Appraiser

CHECK IF THIS IS A FILING BY A CANDIDATE

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 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2019 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 12, 20 20 was \$ 1,885,000.00.

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 \$ _____

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
See Attached	\$1,885,000.00

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Cenlar P.O. Box 77404, Ewing, NJ 08628	\$42,000.00
GMC Financing 75 Remittance Dr. 1738 Chicago, Ill 60675-1738	\$21,565.00
GMC is a Car Lease	

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 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.

I 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 INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Miami-Dade County Property Appraiser	111 N.W. 1st Street, Suite 710, Miami, Florida 33128-1984	\$216,000.00

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

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 ELECTIONS DEPARTMENT

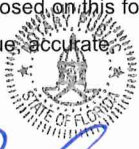
PART F - TRAINING

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.



[Handwritten Signature]

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA

COUNTY OF Miami Dade

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 11th day of

May, 2020 by Pedro J. Garcia

Veronica Rubert
 COMMISSION #GG014022
 EXPIRES: July 24, 2021
 Signature of Notary Public--State of Florida

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

Personally Known OR Produced Identification

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

FORM 6 (ATTACHED)

PEDRO J. GARCIA, MIAMI-DADE COUNTY PROPERTY APPRAISER

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Primary Residence 8420 S.W. 47 th Street, Miami, Florida 33155.....	\$ 495,000.00
Investment Property 8415 S.W. 47 th Street, Miami, Florida 33155.....	\$ 395,000.00
Investment Property 7 Lots Charlotte Estates, Charlotte County, Florida.....	\$ 24,000.00
Investment Property 4 Lots The Meadows of Beautiful Bronson, Levy County, Fl.....	\$ 48,000.00
City National Bank.....	\$ 20,000.00
Ocean Bank.....	\$ 76,000.00
Sunstate Bank.....	\$ 406,000.00
ICMA-RC.....	\$ 269,000.00
GLC 300 Mercedes Benz 2019.....	\$ 57,000.00
Personal Property.....	\$ 105,000.00
Total Assets.....	\$1,885,000.00



OFFICIAL RECEIPT

MIAMI-DADE COUNTY-FLORIDA

No. 7723350

RECEIVED FROM Pedro Garcia

DATE 5 / 12 / 2020
MONTH DAY YEAR

ADDRESS 8420 Sw 47th Street
STREET ADDRESS
Miami CITY FL STATE 33155 ZIP

CASH \$ _____

CHECKS \$ 6,990 . 26

AMOUNT OF: Six Thousand Nine Hundred and Twenty Six DOLLARS, AND Six CENTS

TOTAL \$ 6,990 . 26

FOR PAYMENT OF: Qualifying Fee - Property Appraiser

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

DEPT.: Elections

By: H. Bessa Ginnora

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

PEDRO J GARCIA CAMPAING FUNDS 1001
8420 SW 47 TH ST
MIAMI, FL 33155

DATE May 12, 2020

PAY TO THE ORDER OF Miami-Dade County \$6,990.²⁶/₁₀₀

Six Thousand Nine Hundred Ninety ²⁶/₁₀₀ DOLLARS

OCEAN BANK
7951 S.W. 40TH STREET
MIAMI, FLORIDA 33155

FOR Qualifying Fee Property Appraiser

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT