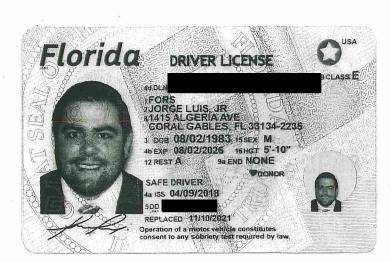
MIAMI-DADE COUNTY	OFFICE USE ONLY								
CANDIDATE OATH –	Proof of residency provided:								
NONPARTISAN OFFICE	Troof of residency provided.								
(Do not use this form if a Judicial or School Board Candidate)	Driver's License Utility Bill								
Check box <i>only</i> if you are seeking to qualify as a write-in candidate:	□ Voter Information Card □ Homestead Exemption Receipt □ Property Tax Receipt □ Lease Agreement								
☐ Write-in candidate									
CANDI	ATE OATH								
	L, Florida Statutes)								
I, Jorge Fors									
	st name consists of two or more names but has no hyphen, check box \square . he end of qualifying. Although a write-in candidate's name is not printed on								
am a candidate for the nonpartisan office of Miami-Dade Co	ounty Commissioner 6 7 8 7 7 7 19 19 19 19 19 19 19 19 19 19 19 19 19								
	(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									
	Under penalties of perjury, I declare that I have read the foregoing								
Candidate's Florida Voter Registration Number (located on you	r voter information card): 100562206								
Phonetic spelling for audio ballot: Print name phonetically on the may be used by persons with disabilities (see instructions on paging j OR j j OR j	ne line below as you wish it to be pronounced on the audio ballot as e 2 of this form): [Not applicable to write-in candidates.]								
X	5) 527-7726 jforsjr@forslegal.com								
and the same of th	phone Number Email Address								
1415 Algeria Avenue Cor	al Gables FL 33134								
Address City	State ZIP Code								
CTATE OF FLORIDA									
STATE OF FLORIDA	<i>~~~~~</i>								
COUNTY OF Mi ami - Dado	Notary Public State of Florida Lynda T Rimart Lynda T Rimart								
Sworn to (or affirmed) and subscribed before me by physical Oo	My Commission HH 149320 Expires 07/06/2025								
online online opresence this 13 day of 500e	20.22.								
Personally Known:or Produced Identification:or Type of Identification Produced: F/ Delugation Produced:	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public								



2022 JUN 13 PH 4: 28

FORM 6 FULL AND PUBLIC DISCLOSURE	2021
Please print or type your name, mailing address, agency name, and position below: OF FINANCIAL INTERESTS FOR	OFFICE USE ONLY:
LAST NAME — FIRST NAME — MIDDLE NAME: Fors, Jr Jorge L. MAILING ADDRESS: 1415 Algeria Avenue	200
	RECI 22 JUN 1
CITY: ZIP: COUNTY: Coral Gables 33134 Miami-Dade NAME OF AGENCY:	OD CO THE
Miami-Dade County Board of County Commissioners NAME OF OFFICE OR POSITION HELD OR SOUGHT:	PN 4:2
Miami-Dade County Commissioner, District 6 CHECK IF THIS IS A FILING BY A CANDIDATE	N- 00
PART A NET WORTH	
Please enter the value of your net worth as of December 31, 2021 or a more current date. [Note: It culated by subtracting your <i>reported</i> liabilities from your <i>reported</i> assets, so please see the instruction	
My net worth as of $\underline{\text{December } 31}$, 20 $\underline{21}$ was \$ $\underline{1,837,772}$	*
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 ca following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; 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 Attachment	
DADT C. LIADULTUS	
PART C LIABILITIES LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4): NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
See Attachment	
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
See Attachment	

		PART D -	INCOME			
	ne tax return, including all W2	s, schedules, a	0 during the year, including secondary and attachments. Please redact any some Commission's website.			
			2's, schedules, and attachments. uneed not complete the remainder of	Part D.]		
PRIMARY SOURCES OF INCO	OME (See instructions on pa	ige 5):			¥	
NAME OF SOURCE OF INC	OME EXCEEDING \$1,000		ADDRESS OF SOURCE OF INCOM	1E	AMOUN	VT
See Attachment						
SECONDARY SOURCES OF II	NCOME [Major customers, cli	ents. etc., of b	usinesses owned by reporting person-	-see instruction	ons on page 51:	
NAME OF BUSINESS ENTITY	NAME OF MAJOR OF BUSINESS	RSOURCES	ADDRESS OF SOURCE	ï	PRINCIPAL BUSIN ACTIVITY OF SOU	
N/A						
p	ADT E _ INTEDESTS II	N SPECIFIE	CD BUSINESSES [Instructions of	n nage 61	60.50	
1	BUSINESS ENTITY		BUSINESS ENTITY # 2		NESS ENTITY # 3	
NAME OF	N/A		V/A	N/A		eng/m]
BUSINESS ENTITY ADDRESS OF					85 C	FTI
BUSINESS ENTITY PRINCIPAL BUSINESS					33 5	-0-
ACTIVITY					55 5	1 4 2
POSITION HELD WITH ENTITY					品品。	55 hores
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					ANG A	A second
NATURE OF MY OWNERSHIP INTEREST					THE N	
	的数是多数的数据的数据等的数据	DADTE	TRAINING		<u> </u>	
This section applies only to	officers required to comple		hics training pursuant to section 1	12 3142 FS	: [See instructions	n 61
			PLETED THE REQUIRED			, p. oj
		STATE	OF FLORIDA		(1) (1) (1) (1) (1) (1) (1) (1) (1)	7. Nov. 10.32
\mathbf{O} A	ATH		ITY OF MIAMI - DO	de		
I, the person whose name app	ears at the		to (or affirmed) and subscribed before			
beginning of this form, do depo	ose on oath or affirmation	 phy	ysical presence or 🔲 online notariza	tion, this/	3 day of	
and say that the information di			June , 20 22 by Jo	rge Luis	FORS, Jr	
and any attachments hereto is	true, accurate,	d	Sunda 1 Rimart 3	harran	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~~
and complete.		(Signa	ture of Notary PublicState of Florid	S W W	Notary Public State of Lynda T Rimart	
		/ Ly/	<i>AD T. M. MOLT</i> Type, or Stamp Commissioned Name	of North Pi	My Commission HH 1 Expires 07/06/2025	49320
-/2	Y			duced Identifi		~~~
SIGNATURE OF REPORTING	OFFICIAL OR CANDIDATE	:				
		Туре с	of Identification Produced FLD	river L	cerise	
		73, or attorney	y in good standing with the Florida	Bar prepared	I this form for you,	he or
she must complete the follow						
		, prepared	the CE Form 6 in accordance with	Art. II, Sec. I	8, Florida Constitut isclosure herein is	tion, true
I. 2050 A. 2/ES	nutes, and the instructions t	.0 1110 101111. 0	pointing reasonable knowledge and			uuo
Section 112.3144, Florida Sta and correct.				/ 13/2	2022	
Section 112.3144 Florida Sta and correct.				/ Data		
Section 112.3144, Florida Sta and correct.				Date		
Section 112.3144, Florida Sta and correct.		oes not reli	eve the filer of the responsibili	ty to sign t	he form under o	oath.

JORGE L FORS JR	1 C 4 ± 6.	
FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS		
FORM 6	J. 22-	
2021	on h: 35	
Attachment	N 13 PM 4: 35 N 13 PM 4: 35 N - DADE COUNTY R, 97228 (#3076)	
Page 1, PART B - ASSETS	COUNTY	
BANK ACCOUNTS	41-DALEBARTMEN	VALUE OF ASSETS
Checking Account - Wells Fargo Bank, PO Box 6995, Portland, C	R, 97228 (#3076)	\$614.00
Checking Account - Wells Fargo Bank, PO Box 6995, Portland, C		\$1,500.00
Checking Account - Wells Fargo Bank, PO Box 6995, Portland, C	R, 97228 (#9574)	\$8,189.00
Checking Account - Wells Fargo Bank, PO Box 6995, Portland, C		\$112,944.00
Checking Account - Wells Fargo Bank, PO Box 6995, Portland, C	R, 97228 (#5695)	\$18,903.00
TOTAL BANK ACCOUNTS		\$142,150.00
INVESTMENT ACCOUNTS		MARKET VALUE
Individual Investment Account - E*Trade Securites LLC, PO Box	484, Jersey City, NJ, 07303 (#2715)	\$39,149.00
Individual Investment Account - E*Trade Securites LLC, PO Box	484, Jersey City, NJ, 07303 (#6939)	\$2,696.00
Cryptocurrency Account - CoinBase, 548 Market St, Ste 23008,	\$7,645.00	
TOTAL INVESTMENT ACCOUNTS		\$49,490.00
RETIREMENT ACCOUNTS		MARKET VALUE
Individual Retirement Account (IRA) - E*Trade Securites LLC, PC	Box 484, Jersey City, NJ, 07303 (#7154)	\$37,450.00
Simple Plan IRA - Charles Schwab & Company Inc, 2525 Ponce D	De Leon Boulevard, Suite 300, Coral Gables, FL, 33134	\$12,785.00
City of Coral Gables - FRS Retirement Account, 3189 S Blair Stor	\$12,057.00	
TOTAL RETIREMENT ACCOUNTS		\$62,292.00
INVESTMENTS IN REAL ESTATE		MARKET VALUE
Personal Residence - 1415 Algeria Avenue, Coral Gables, FL, 33:	\$1,665,500.00	
TOTAL INVESTMENTS IN REAL ESTATE		\$1,665,500.00
INVESTMENT IN BUSINESSES		MARKET VALUE
Jorge L. Fors, JR, PA (100% Owned) 1108 Ponce De Leon Boulev	ard, Coral Gables, FL, 33134	\$500,000.00
North Ponce, LLC (50% Owned jointly with wife) 1108 Ponce De	Leon Boulevard, Coral Gables, FL, 33134	\$500,000.00
TOTAL INVESTMENT IN BUSINESSES		\$1,000,000.00
		MARKET VALUE
HOUSEHOLD GOODS AND PERSONAL EFFECTS		\$87,000.00
TOTAL HOUSEHOLD GOODS AND PER	SONAL EFFECTS	\$87,000.00
	TOTAL PART B ASSETS	\$3,006,432.00
	TO TALL TAIL D'ASSETS	\$3,000,432.00
Page1, PART C - LIABILITIES		
Home Mortgage on Personal Residence - Fifth Third Bank, PO B	ox 630412 Cincinnati OH 45263	\$1,113,969.00
Student Loans - Lendkey Technologies, Inc, PO Box 392283, Pitt	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	\$54,691.00
TOTAL LIABILITIES		\$1,168,660.00
		Walk to the second to the second
	TOTAL PART C LIABILITIES	\$1,168,660.00
NET WORTH (ASSETS - LIABILITIES)		\$1,837,772.00
Page, 2 PART D - INCOME		
PRIMARY SOURCES OF INCOME		
Jorge L. Fors JR, PA (W-2)	1108 Ponce De Leon Boulevard, Coral Gables, FL, 33134	\$57,000.00
Jorge L. Fors, PA (W-2)	1108 Ponce De Leon Boulevard, Coral Gables, FL, 33134	\$1,154.00
City of Coral Gables (W-2)	405 Biltmore Way, Coral Gables, FL, 33134	\$22,958.00
Jorge L. Fors JR, PA (K-1, Distributive Income estimate)	1108 Ponce De Leon Boulevard, Coral Gables, FL, 33134	\$450,000.00
	TOTAL INCOME	\$531,112.00

MIAMI-	DADE)
COUNTY	Wall of

OFFICIAL RECEIPT MIAMI-DADE COUNTY-FLORIDA

No. 7900426

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	26	Jorge Fo	rs Jr. C	ampaiç ad, Suite	ın	CURITY FE	ATURES L	हिंगुइ० (८	n back ini	Regions B Coral Gable	ank	OPYING E	5/26/		0114
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