# **CANDIDATE OATH** JUDICIAL OFFICE

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

# Write-in candidate

# RECEIVED

2024 APR 16 AM 11: 50

— Write-iii carialdate		OFFICE USE ONLY			
Candi	idate Oath ELECTIONS				
Name to appear on ballot: Patricia Marino-Pedraza					
Check box if two last names without hy,		g.)			
Check box if name includes nickname. (For use of a nic	ckname, you must complete the Nickname Affidavit on	reverse side.)			
I swear or affirm that I am a candidate for the judicial office of Co	I ()TICE)	, N/A (District #)			
11th #1 : my legal residence i	Miami-Dade				
11th; my legal residence i	s_ <del>Man Dado</del>	County, Florida;			
I am a qualified elector of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the constitution and 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 to the office I seek; I have resigned from any office which I am required to resign pursuant to s. 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 (only applicable if elected and when term of office begins): I am 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.					
Statement of Outstand	ing Fines, Fees, or Penalties				
I owe outstanding fines, fees, or penalties, that cumulatively exce	ed \$250, for ethics or campaign finance violations (	s. 105.031(4) F.S.).			
YES, I Do	NO, I Do Not X				
If you do, you must also specify the amount owed and each	entity that levied the same on the reverse side.				
$\times$ 1 M/V (305)569-2	502 judgepmp@gr	mail.com			
Signature of Candidate Telephone Numb	er Email Addres	SS			
Address of Legal Residence City	State	ZIP Code			
STATE OF FLORIDA	Ossa E Aus	211 0000			
COUNTY OF Miami-Pade	Signature of Notary Public Print, Type, or Stamp Commissioned Name of N	Notary Public below:			
Sworn to (or affirmed) and subscribed before me by means of	Time, Type, or otamp commissioned Name of t	votary i ubile below.			
online notarization OR physical presence this of day of OR Produced Identification Type of Identification Produced:	CARMEN S HERNANDEZ Notary Public - State of Florida Commission # HH 140467 My Comm. Expires Jun 12, 2025 Bonded through National Notary Assn.				
DS-DE 303JU (Eff. 10/2023)	Ru	ıle 1S-2.0001, F.A.C.			

P	hor	netic	Snel	lina	of N	Name
	1101	CLIC	ODG	IIII	OI I	valle

Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the 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 3 of this form):

Pahtrishuh Mahreeno-Pahdrahzah

DS-DE 303JU (Eff. 10/2023)

## Statement of Outstanding Fines, Fees or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

chapter 106.	
Amount	Entity
Affidavit of Nickname (Only req	uired if using nickname for the ballot.)
V. Torrest Commercial	
	I am over the age of eighteen (18) and the contents of this
affidavit are true and correct.	
My nickname is	I am generally known by this nickname or have used it as nar
of my legal name. I have not created the nickname to mislead vote	I am generally known by this nickname or have used it as parers. My nickname does not imply I am some other person, constitute
a political slogan or otherwise associate me with a cause or issue, or	
a pointed diagram of entermine accordate the thirt a cause of isotal, t	of that is observed of profune.
Signature of Candidate:	
Value V is the street of the control	
STATE OF FLORIDA	
COUNTY OF	
COUNTY OF	Signature of Notony Bublic
	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Netary Public below
Sworn to (or affirmed) and subscribed before me by means	
of online notarization OR physical presence	RIG MIII:
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Personally Known OR Produced Identification	元
reisonally known [ ] OK Produced Identification [	AMII: 50
Type of Identification Produced:	S
** CHOTOSEA ATTOCKNISHOOD (C. C. CACAMANATA)	

Rule 1S-2.0001, F.A.C.

**General Information** 

Name:

Hon Patricia Lea Marino-Pedraza

CONFIDENTIAL

Address:

Coral Gables Branch Court 3100 Ponce de Leon Blvd. RM. 1-5, Coral Gables, FL 33134

PID 210382

County:

Miami-Dade

AGENCY INFORMATION

Organization

Suborganization

Title

Judicial Circuit (11Th)

**Elected Constitutional Officer** 

**County Court Judge** 

CANDIDATE FOR

Position

Agency Name

Position sought or held

County Judge

Miami-Dade County, 11th Judicial Circuit

County Court Judge, Group 1

#### **Net Worth**

My Net Worth as of April 9, 2024 was \$ 2,165,755.63.

#### Assets

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 effect is \$ 160,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

MIAMI-DADE

Description of Asset	Value of Asset
Miami-Dade County House (property appraiser assessed value)	\$ 371,363.00
Monroe County House (property appraiser assessed value)	\$ 709,917.00
Campaign Loan	\$ 51,000.00
Checking, Savings and IRA (Wells Fargo Bank)	\$ 173,424.41
Telio Credit Union (2 CD's)	\$ 13,621.88
Prudential Financial Account	\$ 9,400.00
US Savings Bonds	\$ 20,719.80
BMW 2024	\$ 59,570.00
Tesla Stock	\$ 5,240.55
Microsoft stock	\$ 13,140.28
Abbvie, Inc. stock	\$ 2,024.76
JP Morgan Chase stock	\$ 1,961.55
Proctor & Gamble stock	\$ 1,876.86
Walt Disney stock	\$ 2,595.80
Amazon stock	\$ 1,854.40
Biomarin Pharmaceuticals stock	\$ 1,766.29
Church & Dwight stock	\$ 1,217.28
IRA AMCAP Fund-A	\$ 24,991.47
IRA Fundamental Investors-A	\$ 26,539.72
IRA Growth Fund of America-A	\$ 30,409.02
IRA Smallcap World Fund A	\$ 18,776.33
Mutual Funds American Balanced Fund-A	\$ 64,831.21
Mutual Funds American Mutual Fund-A	\$ 68,826.79
Mutual Funds Capital World Growth & Income Fund-A	\$ 120,322.47
Mutual Funds Europacific Growth Fund A	\$ 94,824.52
Mutual Funds New Perspective Fund-A	\$ 150,335.33

### Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
BMW Financial Services	5550 Britton Parkway, Hilliard, Ohio 43026	\$ 29,611.61
Chase Visa credit card	P.O. Box 15123, Wilmington, DE 19850	\$ 3,658.48

#### JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Amount of Liability

#### 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 2023 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 2023 federal income tax return and all W2s, schedules, and attachments.

#### PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
State of Florida	200 East Gaines Street, Tallahassee, FL 32399	\$ 180,616.08

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

MIAMI-DADE

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## **Interests in Specified Businesses**

**Business Entity #1** 

N/A

## **Training**

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

## Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

# Patricia Lea Marino-Pedraza

Digitally signed: 04/15/2024

Filed with COE: 04/15/2024

MIAMI-DADE

2024 APR 16 AM 11:51

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AMOUNT OF:	ADDRESS HOS MIAMI-DADE COUNTY- RECEIVED FROM LIVE ADDRESS HOS MICHAEL OF: CHARLES TO BE COUNTY- TOF: CHARLES TO BE COUNTY- TOFICE USE ONLY	STREET ADDRESS FL. 33/	CASH  CASH  CHECKS  CENTS TOTAL  CASH  CHECKS	10.8251115 1 16 , 24 DNTH DAY YEAR \$ 7, 224 . 64 \$ 7, 224 . 64 EMPLOYEE OF DEPARTMENT.
Trans	Subsidiary	INDEX CODE	Subobject	AMOUNT
107 01-1 6/04				