RESET269 MIAMI-DADE CO TY	OFFICE USE ONLY PRINT						
CANDIDATE OATH NONPARTISAN OFFICE	Proof of residency provided:						
(Do not use this form if a Judicial or School Board Candidate)	☐ Driver's License ☐ Utility Bill						
Check box only if you are seeking to qualify as a write-in candidate:							
Write-in candidate (Although a Write-in candidate's name is not printed on the ballot, the name must be printed below for oath purposes.)	□ Voter Information Card □ Homestead Exemption Receipt □ Property Tax Receipt □ Lease Agreement						
	date Oath						
Name to appear on ballot: Keon Hardemon							
(Print name above as you wi	ish it to appear on the ballot – Name cannot be changed after qualifying.)						
 Check box if two last names without hyphen Check box if name includes nickname (For use of a nickname, you must complete the Nickname Affidavia 	Miami-Dade Board of County Commissioners						
I swear or affirm that I am a candidate for the nonpartisan office of	(Office)						
	ni-Dade County, Florida; I am qualified under the Constitution and the						
(District/Area/Subarea #) 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 mirmy residency in the district for the prescribed period. Under prescribed and that the facts stated in such are true.	nimum residency requirements for this office, and submitting proof of penalties of perjury, I declare that I have read the foregoing Oath of						
	ding Fines, Fees, or Penalties d \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.). NO, I Do Not						
If you do, you must also specify the amount owed and each	ch entity that levied the same on the reverse side.						
x	,						
Signature of Candidate Tele	ephone Number Email Address						
Address City	State ZIP Code						
STATE OF FLORIDA							
COUNTY OF Hiami-Dade	SANDY POZO Notary Public - State of Florida						
Sworn to (or affirmed) and subscribed before me by physical ☑ o	Commission # HH 475230 My Comm. Expires Dec 20, 2027						
online presence this 315 day of	2024 Bonded through National Notary Assn.						
Personally Known:	Clared:						
Produced Identification:	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public						

Electric Bill Statement

For: Mar 29, 2024 to Apr 30, 2024 (32 days)

Statement Date: Apr 30, 2024

Account Number: Service Address:

Hello Keon Hardemon, Here's what you owe for this billing period.

CURRENT BILL

\$291.44

TOTAL AMOUNT YOU OWE

May 21, 2024

NEW CHARGES DUE BY

Total amount you owe



BILL SUMMARY

 Amount of your last bill
 272.03

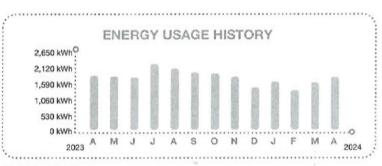
 Payments received
 -272.03

 Balance before new charges
 0.00

 Total new charges
 291.44

(See page 2 for bill details.)

An approved rate decrease is in effect. Rates will decrease again in May. Learn more at ${\sf FPL.com/Rates}$.



KEEP IN MIND

Payments received after May 21, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.



Customer Service: (305) 442-8770 Outside Florida: 1-800-226-3545

Report Power Outages: Hearing/Speech Impaired:

\$291.44

1-800-4OUTAGE (468-8243) 711 (Relay Service)



Ways to Pay



KEON HARDEMON

The amount enclosed includes the following donation: FPL Care To Share:

Make check payable to FPL in U.S. funds and mail along with this coupon to:

FPL GENERAL MAIL FACILITY MIAMI FL 33188-0001

Visit FPL.com/PayBill for ways to pay.

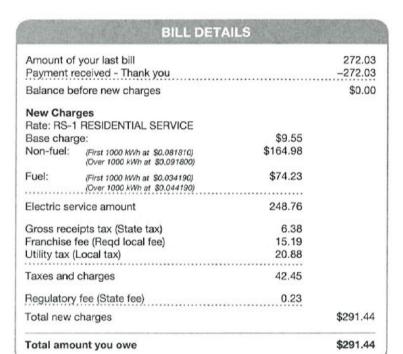


\$291.44 TOTAL AMOUNT YOU OWE May 21, 2024

\$

NEW CHARGES DUE BY





METER SUMMARY

Meter reading - Meter ACD8448. Next meter reading May 31, 2024.

Usage Type	Current	-	Previous	=	Usage
kWh used	97372		95466		1906

ENERGY USAGE COMPARISON

	This Month	Last Month	Last Year
Service to	Apr 30, 2024	Mar 29, 2024	Apr 29, 2023
kWh Used	1906	1699	1958
Service days	32	29	30
kWh/day	60	59	65
Amount	\$291.44	\$272.03	\$334.29

KEEP IN MIND

- Taxes, fees, and charges on your bill are determined and required by your local and state government to be used at their discretion.
- The fuel charge represents the cost of fuel used to generate electricity. It is a direct pass-through to customers. FPL does not profit from fuel, although higher costs do result in higher state and local taxes and fees.



Download the app

Get instant, secure access to outage and billing info from your mobile device.

Download now >

Cash in on a new A/C

Improve comfort and see savings over time with a new, energy-efficient A/C unit. Install today to save up to \$2,150!

Start my install >

When you pay by check, you authorize FPL to process your payment electronically or as a draft. If your payment is processed electronically, your checking account may be debited on the same day we receive the check and your check will not be returned with your checking account statement. FPL does not agree to any restrictions, conditions or endorsements placed on any bill statement or payments such as check, money order or other forms of payment. We will process the payment as if these restrictions or conditions do not exist.

General Information

Name:

Hon Keon Hardemon Esq

CONFIDENTIAL

Address:

111 NW 1ST ST, MIAMI, FL 33128

PID 236897

County:

Miami-Dade

AGENCY INFORMATION

Organization	Suborganization	Title
Miami-Dade County	Adrienne Arsht Center Trust Board	Board of County Commissioners
Miami-Dade County	Elected Constitutional Officer	Commissioner
Miami-Dade County	Miami International Airport	TPO Board Member
Miami-Dade Transportation Planning Organization (TPO)	Governing Board	TPO Board Member

CANDIDATE FOR

Position	Agency Name	Position sought or held
County Commission	Miami-Dade Board of County Commissioners	District 3

Net Worth

My Net Worth as of <u>December 31, 2023</u> was \$ 878,238.00.

2024 MAY 31 PM 4: 26

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 \$ 100,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
BANK OF AMERICA (Checking & Savings) 100 North Tryon Street Charlotte, NC	\$ 6,337.00
Real Property (495 Allison Road Cordell, GA 31015)	\$ 72,854.00
Real Property	\$ 430,000.00
United Police Federal Credit Union	\$ 5,000.00
Florida Pre-Paid College Plan	\$ 17,500.00
The Law Offices of Keon Hardemon, P.A.	\$ 143,000.00
Cash	\$ 50,000.00
ICMARC(Mission Square Retirement Target 2045 R5/Fidelity Freedom Index 20455 Investor) P.O. Box 96220 Washington, D.C. 20090	\$ 203,817.00

MIAMI-DADE COUNT

IABILITIES IN EXCESS OF \$1,0	000:	
Name of Creditor	Address of Creditor	Amount of Liability
Shellpoint Mortgage Servicing	P.O. Box 10826 Greenville, SC 29603	\$ 115,413.00
US BANK S.E. AUTO LOAN	P.O. Box 790179 ST. LOUIS, MO 63179-0179	\$ 34,857.00
IOINT AND SEVERAL LIABILIT	IES NOT REPORTED ABOVE:	
Name of Creditor	Address of Creditor	Amount of Liability
DATE OF THE PARTY OF THE STREET, AND THE STREET, THE STREET		

					m . 22 .	
Identify each separate source income. Or attach a complet Please redact any social secul posted to the Commission's value I elect to file a copy of my PRIMARY SOURCES OF INCOM	e copy of your 20: rity or account nu vebsite. r 2023 federal inco	23 federal incor mbers before a	ne tax return, including all V	V2s, schedules, e law requires th	and attachments.	
Name of Source of Income E	cceeding \$1,000	Address of So	ource of Income		Amount	
MIAMI-DADE COUNTY		111 NW 1ST ST MIAMI, FL 33128			\$ 61,000.00	
MIAMI-DADE COUNTY		111 NW 1ST S	51 MIAMI, FL 33128		\$ 61,000.00	
MIAMI-DADE COUNTY SECONDARY SOURCES OF INCOMA Name of Business Entity		omers, clients, e	2 20 9 20	Principa		

Interests in Specified Businesses	
Business Entity # 1 N/A	
Training	
This section applies only to a Constitutional or elected municipal officer, each of whom are rectaining pursuant to Section 112.3142, F.S. ☑ I certify that I have completed the required training under Section 112.3142, F.S. ☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.	quired to complete annual ethics
Signature of Reporting Official or Candidate	
Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the fact	s stated in it are true.
Keon Hardemon	ZOZ4
Digitally signed: 05/31/2024	REC MANI-DA MECTIONS
Filed with COE: 05/31/2024	PRECEIV

MIAMI-DADE COUNTY-FLORIDA					No.825	1160	
AMOUNT OF:	ADDRESS	STREET ADDRESS Y L SINT DOLLARS,	FL 33/0 STATE 00 ZI AND 700	CASH CHECKS P CENTS TOTAL	\$	3/ 1 29 DAY YE	AR 000
FOR PAYMENT	//	re-4DC	Commission	-	#3	AN LANK AVAING ABOUT LANK	YOU DRY IN DOOR
THIS RECEIP	T NOT VALID UNLESS	DATED, COMPLETED		Y AUTHORIZE	D EMPLOYE	E OF DEPART	MENT
	ICE USE ONLY		By:	1			
TRANS	SUBSIDIARY	INDEX CODE S			Amount		
107.01-1 6/04							
TH	NAMI - DADE (Account	5/31/	\$ 3	1002 360.00 LARS © Safe	to oaite
	YING FEE FOR M OF COUNTY COMMISS	IAMI-DADE OVERS - DISTRICT	-3 minimizer suprander	2		and any and any and any and any	E

FLECTIONS FLECTIONS

SOSHWYX 31 BW 4: St

BECEINED