

**CANDIDATE OATH
SCHOOL BOARD OFFICE**

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

☐ Write-in candidate

MIAMI-DADE
ELECTIONS

OFFICE USE ONLY

Candidate Oath

Name to appear on ballot: Gustavo Ortega

Check box if two last names without hyphen. ☐ (Name cannot be changed after qualifying.)

Check box if name includes nickname. ☐ (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the office of Miami-Dade County School Board Member, 3
(Office) (District #)

I am a qualified elector of Miami-Dade County, Florida; I am a qualified elector 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.

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 Outstanding Fines, Fees, or Penalties

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), 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.

X Gustavo Ortega

(480) 5501817

ortegaforflorida@gmail.com

Signature of Candidate

Telephone Number

Email Address

10350 W. Bay Harbor Dr. Apt 6D Bay Harbor Islands

FL

33154

Address of Legal Residence

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me by means of

online notarization ☐ OR physical presence ☒

this 10 day of JUNE, 2024

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____

Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:



General Information

Name: Gustavo Ortega
 Address: 10350 W BAY HARBOR DR APT 6D, BAY HARBOR IS, FL 33154
 County: Miami-Dade

Organization	Suborganization	Title
N/A		

CANDIDATE FOR

Position	Agency Name	Position sought or held
District School Board	Miami-Dade County Public School Board Member District 3	Miami-Dade County Public School Board Member District 3

Net Worth

My Net Worth as of December 31, 2023 was \$ 400,000.00.

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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 \$ 15,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Condo apt	\$ 650,000.00
Townhouse	\$ 450,000.00
Index 2000	\$ 35,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Nationstar Mortgage LLC d/b/a Mr. Cooper	8950 Cypress Waters Blvd. Dallas, TX 75019	\$ 505,000.00
AmeriHome Mortgage Company	1 Baxter Way, Suite 300 Thousand Oaks, CA 91362-3888	\$ 220,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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.

☐ I 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
Miami-Dade County Public Schools	1450 NE 2nd Ave, RM 271 Miami, FL 33132	\$ 50,625.00

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			

Interests in Specified Businesses**Business Entity # 1**

N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form6 and that the facts stated in it are true.

Gustavo Ortega

Digitally signed: 06/10/2024

For Qualifying
Purposes Only

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