CANDIDATE OATH SCHOOL BOARD OFFICE

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

RECEIVED

2024 MAY 29 AM 8: 37

HIAMI-DADE

☐ Write-in candidate	ELECTIONS OFFICE USE ONLY
Cand	idate Oath
Name to appear on ballot: Javier "Javi" Perez	
Check box if two last names without hy,	yphen. (Name cannot be changed after qualifying.)
	ckname, you must complete the Nickname Affidavit on reverse side.)
I swear or affirm that I am a candidate for the office of Miami-I	Dade County School Board Member 7 (District #)
	(Office) (District #)
I am a qualified elector of Miami-Dade	County, Florida; I am a qualified elector under
other public office in the state, the term of which office or a	to which I desire to be nominated or elected; I have qualified for no any part thereof runs concurrent with the office I seek; and I have pursuant to Section 99.012, Florida Statutes; and I will support the State of Florida.
Florida and of the United States of America, and being emp	ed and when term of office begins): I am a citizen of the State of bloyed by or an officer of the court system and a recipient of public ear or affirm that I will support the Constitution of the United States
Statement of Outstandi	ing Fines, Fees, or Penalties
Lowe outstanding fines, fees, or penalties, that cumulatively exce	ed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).
	NO, I Do Not X
If you do, you must also specify the amount owed and each e	
x Pul (786) 973-4	javierperezd7@gmail.com
Signature of Candidate Telephone Numb	, , , , , , , , , , , , , , , , , , , ,
15338 S.W. 140 Street	FL 33196
Address of Legal Residence City	State ZIP Code
STATE OF FLORIDA	Manue
COUNTY OF Miami Dade	Signature of Notary Public
Sworn to (or affirmed) and subscribed before me by means of	Print, Type, or Stamp Commissioned Name of Notary Public below:
online notarization OR physical presence	MARLEN BACERIO
this 28th day of May , 2024.	MY COMMISSION # HH 166815 EXPIRES: November 29, 2025 Bonded Thru Notary Public Underwriters
Personally Known OR Produced Identification	WHATE.
Type of Identification Produced: D/L	
DS-DE 304SB (Eff. 10/2023)	Rule 1S-2.0001, F.A.C.

	Phonetic Spelli	ng of Name	
Phonetic spelling for the audio ballot wish it to be pronounced on the audio ballot wish it to be pronounced on the audio ballot wish it to be pronounced on the audio ballot wish it to be pronounced on the audio ballot			
Statem	ent of Outstanding F	ines, Fees or Penaltie	os .
Pursuant to Section 99.021(1)(d), F.S. candidate, shall, at the time of subscribir or penalties that cumulatively exceed \$25 and Employees under part III of chapter chapter 106.	ng to the oath or affirmation, sta 50 for any violations of s. 8, Art	ate in writing whether he or she of all of the State Constitution, the	owes any outstanding fines, fees, Code of Ethics for Public Officers
Amount		Entity	
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			37
			THE R. LEWIS CO., LANSING, MICH.
Affidavit of	Nickname (Only require	ed if using nickname for the	e ballot.)
My legal name is Javier Perez		I am over the age of eight	een (18) and the contents of this
affidavit are true and correct.			
My nickname is "Javi"		I am generally known by this	nickname or have used it as part
of my legal name. I have not created th a political slogan or otherwise associate			m some other person, constitute
		:	
Signature of Candidate:	Muy		
STATE OF FLORIDA	. 0	\rightarrow	*
COUNTY OF Mami - Dad	le	Signature of Notary Pul	hlio
Sworn to (or affirmed) and subscribed be	efore me by means	Print, Type, or Stamp Commiss	sioned Name of Notary-Public below:
ATR - MI - D - IN - AN	sical presence		MARLEN BACERIO
this 28th day of May	2024	EX	COMMISSION # HH 166815 PIRES: November 29, 2025
Personally Known OR Produc	ed Identification	Bonde	d Thru Notary Public Underwriters
Type of Identification Produced: 7/4	*		

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

DS-DE 304SB (Eff. 10/2023)

General Information

Name:

Mr Javier Perez

Address:

15338 SW 140TH ST, MIAMI, FL 33196

County:

Miami-Dade

Organization

Suborganization

Title

N/A

CANDIDATE FOR

Position

Agency Name

Position sought or held

District School Board

Miami-Dade County School Board

Miami-Dade County School Board

District 7

Net Worth

My Net Worth as of <u>December 31, 2023</u> was \$ 1,000,000.00.



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 \$ 10,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
15338 SW 140 ST Miami, FL 33196	\$ 600,000.00
15243 SW 112th Terrace Miami, FL 33196	\$ 477,107.04
15772 SW 147 ST Miami, FL 33196	\$ 500,000.00
1601 SE 10th Ave Cape Coral, FL 33990	\$ 390,000.00
Lot 92, Ph II of Waterside on Douglas Lake Dandridge, TN 37725	\$ 25,000.00
Midland National Roth IRA	\$ 45,834.00
Bank Account/ Bank of America	\$ 200,000.00



Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability					
Space Coast Credit Union	8045 N Wickman Road Melbourne, FL 32940	\$ 21,000.00					
flagstar	PO Box 619022 Dallas, TX 75261	\$ 17,000.00					
CROSSCOUNTRY MORTGAGE	P.O. Box 7729 Springfield, OH 45501	\$ 280,000.00					
Ally Financial Auto	P.O. Box 660401 Dallas, TX 75266	\$ 22,000.00					
Chrysler Financial	P.O. Box 660335 Dallas, TX 75266	\$ 38,000.00					

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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



Income								
Identify each separate source income. Or attach a complete Please redact any social secur posted to the Commission's v	e copy of your 202 rity or account nu	23 federal incor	ne tax return, including all W	/2s, schedules,	and attachments.			
☐ I elect to file a copy of my	2023 federal inco	ome tax return a	and all W2s, schedules, and a	attachments.				
PRIMARY SOURCES OF INCOM	E:							
Name of Source of Income Ex	xceeding \$1,000	Address of So	urce of Income		Amount			
Miami-Dade County Public Sc	chools	1500 Biscayne	10000	\$ 140,000.00				
SECONDARY SOURCES OF INCO		omers, clients, e			n): al Business			
Name of Business Entity	Business' Inc		Address of Source		Activity of Source			
N/A		and the same		Market S				
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Interests in Specified	Businesses							
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MIAMI-DADE

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Business Entity #1

N/A

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.

Javier Perez

Digitally signed: 05/28/2024

MIAMI-NANE

RECEIVE

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COUNTY	

OFFICIAL RECEIPT

No.8251144

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