

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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MIAMI-DADE
ELECTIONS

I, LARRY FELDMAN ,

candidate for the office of SCHOOL BOARD - DISTRICT 9 ;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X 
Signature of Candidate

4 JUNE 12
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

MIAMI-DADE

Access to Handbook and the
Election Laws of the State of Florida

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Candidate/Chairperson:

MIAMI-DADE
ELECTIONS

LARRY

FELDMAN

First Name

Middle Name

Last Name

SCHOOL BOARD - DISTRICT 9

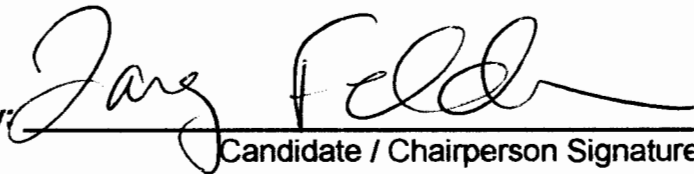
Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

- Candidate Qualifying Handbook (<http://www.miamidade.gov/elections/candidate.asp>)
Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.

Political Committee Handbook (<http://www.miamidade.gov/elections/political-committee.asp>)
Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by:



Candidate / Chairperson Signature

Date:

4 JUNE 12

Primary Telephone Number:

305.773.9337

Alternate Telephone Number:

E-mail address:

Lawrence.Feldman@yahoo.com

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Campaign Treasurer's Report
Electronic Filing Requirements
for Miami-Dade County



MIAMI-DADE
ELECTIONS

Candidate (office sought): SCHOOL BOARD - DISTRICT 9

Candidate's Florida Voter Registration Number: 109032654

Political Committee: n/a

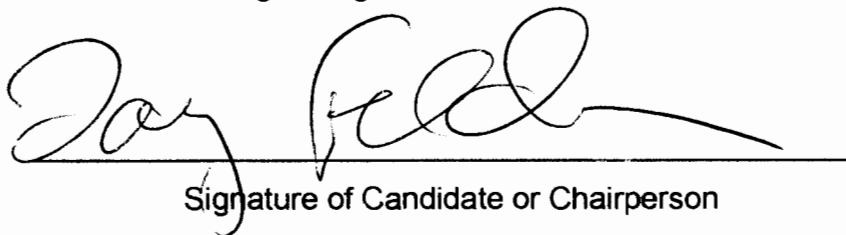
Party Executive Committee: n/a

Other: NON-PARTISAN

I, LARRY FELDMAN
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.


Signature of Candidate or Chairperson

4 JUNE 12
Date

Day Time Telephone No: 305.773.9337

Email Address: LARRY.FELDMAN@YAHOO.COM

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.

**CANDIDATE OATH -
SCHOOL BOARD
NONPARTISAN OFFICE**

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MIAMI-DADE
ELECTIONS

OFFICE USE ONLY

OATH OF CANDIDATE

(Sections 99.021 and 105.031, Florida Statutes)

I, LARRY FELDMAN

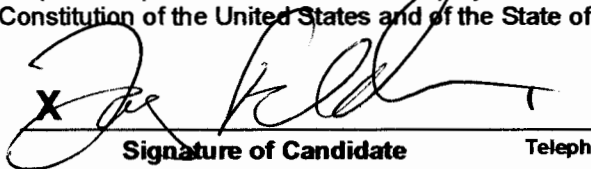
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * - NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of SCHOOL BOARD, 9
(office) (district #)

 , ; I am a qualified elector of DADE County, Florida;
(circuit #) (group or seat #)

I am qualified 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, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the school board 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.

X 

larry@feldman4schoolboard.com

Signature of Candidate

Telephone Number

Email Address

8601 SW 68 Court #2
Address

Miami
City

FL
State

33143
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 109032654

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

LOR-ens FELD-muhn

STATE OF FLORIDA

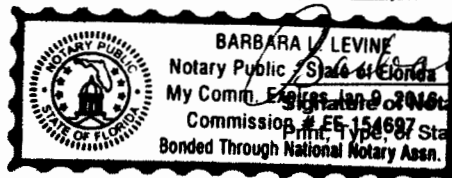
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me this 18th day of MAY, 2012.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____



Barbara L. Levine
Notary Public
My Comm. Expires Jan 9, 2016
Commission # EE-154697
Print, Type, or Stamp Commissioned Name of Notary Public

FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS RECEIVED 2011

Please print or type your name, mailing address, agency name, and position below :

FINANCIAL INTERESTS

2012 JUN -4 PM 12:08

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MIAMI-DADE ELECTIONS

ID Code

ID No. 28927

Conf. Code

P. Req. Code

FELDMAN, LAWRENCE

LAST NAME — FIRST NAME — MIDDLE NAME:
FELDMAN LAWRENCE

MAILING ADDRESS:
8601 SW 38 COURT #2

CITY : ZIP : COUNTY :
MIAMI 33143-7832 MIAMI-DADE

NAME OF AGENCY :
MIAMI-DADE COUNTY PUBLIC SCHOOLS - VICE CHAIR

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
SCHOOL BOARD MEMBER #9 - ELECTED CONSTITUTIONAL OFFICER

CHECK IF THIS IS A FILING BY A CANDIDATE

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2011, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of DECEMBER 31, 20 11 was \$ 2,543,438

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 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.

The aggregate value of my household goods and personal effects (described above) is \$ 25,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
REAL PROPERTY	\$ 90,796.00
INVESTMENT ACCOUNTS- FIDELITY	\$ 918,552.00
- AMERICAN FUNDS	\$ 234,528.00
- PRUDENTIAL	\$ 1,255,092.00
FELDMAN INVESTMENTS LLC	\$ 19,470.00

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
<u>N/A</u>	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
<u>N/A</u>	

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2011 federal income tax return, including all W2's, schedules, and attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2011 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2011 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
WAGES-SCHOOL BOARD M-DCPS	1450 NE 2ND AVE #64, MIAMI FL 33132	\$ 38,718.00
INTEREST INCOME- SO. FL EDUCATIONAL FCU	7800 SW 117 AVE, MIAMI, FL 33138	\$ 72.00
DIVIDENDS - SEE ATTACHED SCHEDULE		\$ 7,750.00

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 5]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

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IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

STATE OF FLORIDA
 COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me this 18th day of

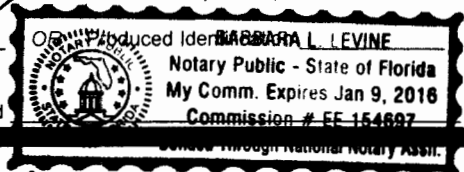
MAY, 2012 by LAWRENCE FELDMAN

Barbara L. Levine
 (Signature of Notary Public--State of Florida)

Barbara L. Levine
 (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known

Type of Identification Produced



[Signature]
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
 INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
 OTHER FORMS you may need to file are described on page 6.

FELDMAN, LAWRENCE
FORM 6- PART D - ATTACHMENT
DIVIDENDS

Fidelity	200 Liberty Street, 5th floor, NY, NY 10281	4,015.00
SEI Private Trust (closed)	One Freedom Valley Dr, Oaks, PA 19456	<u>3,735.00</u>
		<u>7,750.00</u>

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