

AFFIDAVIT OF CANDIDATE

CITY OF MIAMI, FLORIDA

RECEIVED
2017 SEP 22 PM 4:01
OFFICE OF THE CITY CLERK
CITY OF MIAMI

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF MIAMI)

José Suárez (hereinafter "affiant"), being first duly sworn, deposes and says:

1. My name is José Suárez.
2. For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below. Those candidates seeking the office of Commissioner please check and fill in the blank in subsection (b) below:
 - (a) I am offering myself as a candidate for the office of Mayor of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of Miami for the duration of my term of office.
 - (b) I am offering myself as a candidate for the office of Commissioner in District Number 3 of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the district for the duration of my term of office.
3. I have resided in the City of Miami for a minimum of one year before qualifying if applying for Mayor, and one year in the district if applying for the Commission, and I am a registered voter and a duly qualified elector of the City of Miami, Florida, presently registered to vote in Precinct No. 570.

I presently reside at the following address (must include zip code):

1143 SW 13 Court, Miami, FL 33135

which is my legal address, and I have resided continually at said address from the 21 day of October, 2014 to the present.

4. Immediately prior to residing at the above-stated address, I have resided at the hereinbelow listed addresses for the cited periods of time (list hereinbelow all addresses at which you have resided for the past five years, as well as the length of time at each address):

<u>Prior Addresses</u>	<u>For the Period</u>
<u>1145 SW 13 Court</u>	<u>09/01/2010 to</u>
<u>Miami, FL 33135</u>	<u>10/20/2014</u>

5. In addition to the residence that I have listed as my present address, I also reside at the following listed addresses on a temporary basis as a secondary domicile or domiciles:

N/A

6. Affiant's spouse resides at the following address (must include city, state and zip code):

20907 Leeward Court, #251, Miami, FL 33180

7. Affiant's minor children reside at the following address (must include city, state and zip code):

N/A

8. At the present time, affiant (is) is not registered to vote in any city, county or state other than as stipulated in subparagraph 3 above.

9. Name and business address of affiant's employer:

1199SEIU UHE

2881 Corporate Way, Miramar, FL 33025

10. Affiant's occupation: Communications Director

Affiant's business telephone number(s): 305-340-1085

11. Affiant has been employed in the above-cited capacity for the following period of time:

5 years and 3 months

(Note: In the event the occupation of affiant has been for a period of less than one year, or the employment period with the same employer has been for a period of less than one year, affiant shall give the name(s) and address(es) of his/her employer(s) and occupation(s) for the period of one year prior to the date of this affidavit).

N/A

N/A

12. Affiant represents that he/she (is) is not currently holding another elective or appointive office – whether city, county or municipal – the term of which or any part thereof runs concurrently with that of the office he/she seeks, and that he/she has resigned from any office from which he/she is required to resign pursuant to F.S. 99.012 and/or the City of Miami Charter.

13. Affiant represents that, as of this date, he/she (is) is not seeking to qualify for public office which is currently held by an officer who has authority to appoint, employ, promote, or otherwise supervise him/her and who has qualified as a candidate for reelection to that office.

(Note: If affiant is an employee of the City of Miami, affiant shall take a leave of absence, without pay from his/her employment during the period in which affiant has become a candidate for elective public office. This subsection does not apply to the Commissioners and Mayor, City Manager, City Attorney, City Clerk, and Independent Auditor General. Such leave of absence shall be effective upon whichever occurs first:

(a) Such employee receives contributions or makes expenditures, or gives her or his consent for any other person to receive contributions or make expenditures, with a view to bringing about his or her nomination or election to public office; or

(b) At the time such employee appoints a campaign treasurer and designates a primary depository; or

(c) At the time such employee files qualification papers and subscribes to a candidate's oath as required by law.

The definition of "city board" is found in Section 2-882 of the Miami City Code.

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14. Affiant's campaign headquarters address and telephone number:

1143 SW 13 Court, Miami, FL 33135 305-858-4108

Affiant's campaign treasurer's name:

Wendy Sosa

Affiant's campaign treasurer's address:

1143 SW 13 Court, Miami, FL 33135

Telephone numbers: (work) 786-514-9798

(home) 786-514-9798

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15. Affiant represents that, if elected, he/she shall serve in the elective office to which he/she seeks election.

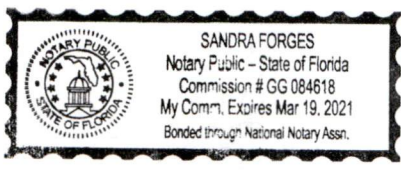
16. Following is the exact way in which affiant would like to have his/her name printed on the official ballot: José Suárez

SIGNED THIS 22nd DAY OF September, 2017.

Jose Suarez
AFFIANT

BEFORE ME, the undersigned authority, personally appeared Jose A. Suarez, who, after first being duly sworn, deposes and states that he executed the foregoing to the best of his knowledge and belief.

SIF
CITY CLERK
CITY OF MIAMI, FLORIDA



(SEAL)

Did take an oath

Produced identification

Type of identification produced: FL Driver License

FORM 1

**STATEMENT OF
FINANCIAL INTERESTS**

2016

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Suarez Jose

MAILING ADDRESS :

1143 SW 13 Court

CITY : ZIP : COUNTY :
Miami 33135 Miami-Dade

NAME OF AGENCY :
City of Miami Commission *JS*

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
City of Miami Commissioner, District 3

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

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 CITY OF MIAMI

**** **BOTH PARTS OF THIS SECTION MUST BE COMPLETED** ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2016 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
1199SEIU United Healthcare	2881 Corporate Way, Miramar, FL 33025	Labor Union
Workers East		

PART B -- SECONDARY SOURCES OF INCOME
[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
People Speak Strategic	Consulting Fees	20907 Leeward Court, #251	Public Relations
Communications		Miami, FL 33025	

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

n/a

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions] (If you have nothing to report, write "none" or "n/a")	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
n/a	

PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")	
NAME OF CREDITOR	ADDRESS OF CREDITOR
n/a	

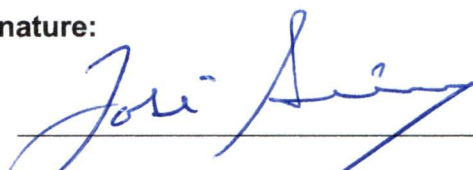
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a")		
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	n/a	n/a
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

PART G — TRAINING
For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

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

SIGNATURE OF FILER:

Signature: 

Date Signed: 9/22/17

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

<p>WHAT TO FILE:</p> <p>After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.</p> <p>If you have nothing to report in a particular section, write "none" or "n/a" in that section(s).</p> <p>NOTE: MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.</p> <p><u>Facsimiles will not be accepted.</u></p>	<p>WHERE TO FILE:</p> <p>If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.</p> <p>Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)</p> <p>State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.</p> <p>Candidates file this form together with their qualifying papers.</p> <p>To determine what category your position falls under, see page 3 of instructions.</p>	<p>WHEN TO FILE:</p> <p>Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.</p> <p>Candidates must file at the same time they file their qualifying papers.</p> <p>Thereafter, file by July 1 following each calendar year in which they hold their positions.</p> <p>Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2016.</p>
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**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

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2017 SEP 22 PM 4:02

OFFICE OF THE CITY CLERK
CITY OF MIAMI

OFFICE USE ONLY

OATH OF CANDIDATE
(Section 99.021, Florida Statutes)

I, José Suárez

(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 City of Miami Commissioner, District 3,
(office) (district #)

 , ; I am a qualified elector of Miami-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.

X *José Suárez*
Signature of Candidate

(305) 858-4108
Telephone Number

jose@josesuarez.miami
Email Address

1143 SW 13 Court
Address

Miami
City

Florida
State

33135
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 111896411

* 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):

ho-sE SOOA-rez

STATE OF FLORIDA
COUNTY OF Miami-Dade

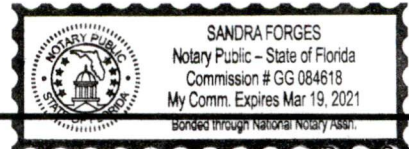
Sworn to (or affirmed) and subscribed before me this 22nd day of September, 2017.

Personally Known: _____ or

Produced Identification: ✓

Type of Identification Produced: FL Driver License

Sandra Forges
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



LOYALTY OATH

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

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OFFICE OF THE CITY CLERK
CITY OF MIAMI

I, José Suárez
First Name Middle Initial Last Name

a citizen of the State of Florida and of the United States of America, ... and a candidate for public office ... do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

José Suárez
Signature of Candidate

**CITY OF MIAMI OATH OF CANDIDATE
OFFICE OF CITY OF MIAMI COMMISSIONER**

Before me, an officer authorized to administer oaths, personally appeared

José Suárez
(PLEASE PRINT NAME)

who, being sworn, says he/she is a candidate for the office of **City of Miami Commissioner, District 3**, for the City of Miami, Florida; that he/she is a qualified elector of the City of Miami, Florida; that he/she is qualified under the Constitution, the Laws of Florida, and City of Miami Charter to hold the office to which he/she desires to be elected; that he/she has taken the oath required by Section 99.021, Florida Statutes; that he/she has qualified for no other public office in the State, the term of which office or any part thereof runs concurrent with that of the office he/she seeks; and that he/she has resigned or taken a leave of absence from any office from which he/she is required to resign or take a leave of absence, pursuant to Section 99.012, Florida Statutes.

José Suárez
Signature of Candidate

1143 SW 13 Court Miami Florida 33135
Address City State ZIP Code

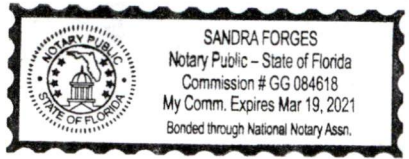
The Loyalty Oath and Oath of Candidate are sworn to (or affirmed) and subscribed before me this 22nd day of September, 20 17.

[Signature]
Signature of Officer Administering Oath or Notary Public

Sandra Forges
Name of Notary Typed, Printed or Stamped

Personally Known: _____ OR Produced Identification:

Type of Identification Produced: FL Driver License



**ACKNOWLEDGMENT BY CANDIDATES COVERED BY
THE MANDATORY PROVISION
OF THE
ETHICAL CAMPAIGN PRACTICES ORDINANCE**

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CITY OF MIAMI


The Mandatory Fair Campaign Practices of the Ethical Campaign Practices Ordinance automatically extend to candidates and their respective campaign staffs for the Miami-Dade County Commission or Mayor; candidates and their respective campaign staffs for Miami-Dade Community Councils, candidates and their respective campaign staffs for any municipal elective office within Miami-Dade County; candidates and their respective campaign staffs for the Property Appraiser of Miami-Dade County; and any candidate and his or her campaign staff for elective office with a constituency in whole or in part in Miami-Dade County.

As provided in the Miami-Dade County Code at Sec. 2-11.1.1 (C), I shall not—

- (a) With actual malice make or cause to be made any untrue oral statement about another candidate or a member of his or her family or staff which exposes said person to hatred, contempt, or ridicule or causes said person to be shunned, avoided, or injured in his or her business or occupation;
- (b) With actual malice publish or cause to be published by writing, printing, picture, effigy, sign, or otherwise than by mere speech any untrue statement about another candidate or a member of his or her family or staff which exposes said person to hatred, contempt, or ridicule or causes said person to be shunned or avoided, or injured in his or her business or occupation;
- (c) Willfully injure, deface, or damage or cause to be injured, defaced, or damaged by any means any campaign poster, sign, leaflet, handbill, literature, or other campaign material of another candidate;
- (d) Knowingly obtain, or cause to be obtained, the campaign property of another candidate with the intent to, temporarily or permanently, deprive the candidate of a right to the property or a benefit thereof; or
- (e) Knowingly file with the Ethics Commission a groundless or frivolous complaint against another candidate.

I, José Suárez, a candidate for the office of
please print your name
Commissioner, District 3 in City of Miami,
elective office sought county, municipality, or other jurisdiction

acknowledge that the Mandatory Fair Campaign Practices as provided in the Miami-Dade County Code at Sec. 2-11.1.1 (C)(1) applies to me throughout this campaign period, regardless of when I sign this acknowledgment. I recognize as compulsory the jurisdiction of the Ethics Commission. The Ethics Commission has the authority to decide whether I have violated the Mandatory Fair Campaign Practices of the Ethical Campaign Practices Ordinance and, if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any.

x 
Signature

9/22/17
Date

Candidates for county office file with the Miami-Dade County Elections Department. Candidates for municipal office file with their respective municipal clerks. For further information, please contact the Miami-Dade County Office of Governmental Affairs at 305 499-8410.

Miami Dade County Elections Dept.
2700 NW 87th Ave. *or* P.O. Box 521550
Miami, FL 33172 Miami, FL 33152-1550

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OFFICE OF THE CITY CLERK
CITY OF MIAMI

WELLS FARGO BANK

1032

MIRAMAR 6810 MIRAMAR PKWY MIRAMAR, FL 33023

DATE 9/22/17

PAY TO THE ORDER OF

CITY OF MIAMI

\$ 682.00

SIX HUNDRED EIGHTY-TWO & 00/100

DOLLARS

JOSE SUAREZ FOR DISTRICT 3
1143 SW 13TH CT
MIAMI FL 33135-5435

Rendy Sora



City of Miami OFFICIAL RECEIPT

No. 485052

\$ 682.00 Sales Tax \$ — Total \$ 682.00

Date: 9/22/17

SIX HUNDRED AND EIGHTY TWO

/100 Dollars

Received from: JOSE SUAREZ

Address: 1143 SW 13TH CT MIAMI FL 33135

For: Qualifying Commission D3 Reference No: CHECK NO. 1032

This Receipt not VALID unless dated, filled in and signed by authorized employee of department or division designated hereon and until the City has collected the proceeds of any checks tendered as payment herein.

By: Sandra Forges

Department: CITY CLERK

Division: ELECTION

C FN/TM 402 Rev. 03/03

Distribution: White - Customer; Canary - Finance; Pink - Issuing Department



Account Number [REDACTED]
 Billing Date 09/10/17
 Total Amount Due \$90.65
 Auto Pay 10/01/17
 Page 1 of 4

Contact us: @ xfinity.com/customersupport

Jose Suarez

For service at:
 1143 SW 13TH CT REAR
 MIAMI FL 33135-5435

Thanks for choosing XFINITY from Comcast

Visit xfinity.com/moving today to help you stay connected to all of your XFINITY services.

Thank you for your prompt payment. For quick and convenient ways to manage your account, please visit www.Xfinity.com/myaccount

Monthly Statement Summary

Previous Balance	149.81
Credit Card Payment - 09/01/17	-107.65
Balance Forward	42.16
New Charges - see below	48.49
Total Amount Due	\$90.65
Auto Pay	10/01/17



New Charges Summary

Internet	79.95
Add'l Products, Services & Equipment	10.00
Partial Month Charges & Credits	-25.74
<i>Changes were made to your account this month. See the following pages for more details.</i>	
Other Charges & Credits	-6.99
Taxes, Surcharges & Fees	-8.73
Total New Charges	\$48.49

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 CITY OF MIAMI



141 NW 16TH ST POMPANO BEACH FL 33060-5250
 [REDACTED]

JOSE SUAREZ
 1143 SW 13TH CT REAR
 MIAMI, FL 33135-5435

Account Number [REDACTED]
 Auto Pay 10/01/17
 Total Amount Due \$90.65

Credit Card Payment To Be Applied 10/01/17

COMCAST
 PO BOX 530098
 ATLANTA GA 30353-0098





Account Number [REDACTED]
 Billing Date 08/10/16
 Total Amount Due \$158.91
 Auto Pay 09/01/16
 Page 1 of 4

Contact us: @ www.xfinity.com ☎ 1-800-XFINITY (1-800-934-6489)

Jose Suarez

For service at:
 1143 SW 13TH CT REAR
 MIAMI FL 33135-5435

News from Comcast

Thank you for your prompt payment. For quick and convenient ways to manage your account, please visit www.Xfinity.com/myaccount

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 CITY OF MIAMI

Monthly Statement Summary

Previous Balance	158.89
Credit Card Payment - 08/01/16	-158.89
New Charges - <i>see below</i>	158.91
Total Amount Due	\$158.91
Auto Pay	09/01/16

New Charges Summary

XFINITY Bundled Services	109.00
Additional XFINITY TV Services	17.94
Additional XFINITY Internet Services	10.00
Additional XFINITY Voice Services	0.00
Other Charges & Credits	9.36
Taxes, Surcharges & Fees	12.61
Total New Charges	\$158.91



Thank you for being a valued XFINITY customer!



141 NW 16TH ST. POMPANO BEACH, FL 33060-5250

JOSE SUAREZ
 1143 SW 13TH CT REAR
 MIAMI, FL 33135-5435

Account Number [REDACTED]
 Auto Pay 09/01/16

Total Amount Due \$158.91

Credit Card Payment To Be Applied 09/01/16

COMCAST
 PO BOX 530098
 ATLANTA GA 30353-0098

