

**AFFIDAVIT OF CANDIDATE**

**CITY OF MIAMI, FLORIDA**

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2019 SEP -6 PM 3: 33

OFFICE OF THE CITY CLERK  
CITY OF MIAMI

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

Manuel E. Reyes (hereinafter "affiant"), being first duly sworn, deposes and says:

1. My name is Manuel E. Reyes.
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 4 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. 557.

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

5301 SW 7 Street, Miami, FL 33134

which is my legal address, and I have resided continually at said address from the 1 day of July, 1979 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):

Prior Addresses

For the Period

N/A

N/A

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):

5301 SW 7 Street, Miami, FL 33134

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:

N/A (Retired)

N/A (Retired)

10. Affiant's occupation: N/A

Affiant's business telephone number(s): N/A

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

N/A

**(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.**

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CITY OF MIAMI

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

N/A

Affiant's campaign treasurer's name:

Fausto Alvarez

Affiant's campaign treasurer's address:

2828 Coral Way, Suite 400, Miami, FL 33145

Telephone numbers: (work) (305) 442-1010

(home) N/A

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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: Manolo Reyes

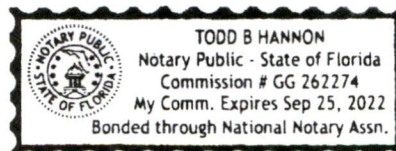
SIGNED THIS 6 DAY OF SEPTEMBER, 2019.

Manuel E. Reyes  
AFFIANT

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

[Signature]  
CITY CLERK  
CITY OF MIAMI, FLORIDA

(SEAL)



Did take an oath

Produced identification

Type of identification produced: FL Driver's License

# AFFIDAVIT OF NICKNAME

STATE OF Florida

COUNTY OF Miami-Dade

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CITY OF MIAMI

BEFORE ME, the undersigned, personally appeared:

Manuel E. Reyes

(write legal name of candidate)

who being first duly sworn or placed under affirmation says:

1. My legal name is: Manuel E. Reyes  
I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

2. I am a candidate for the office of: City of Miami Commissioner, District 4

3. My nickname is: Manolo Reyes

I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. I plan to designate this nickname on my candidate oath as the same name I wish to have printed on the ballot when I submit the candidate oath form during the qualifying period for the above office.

4. Attached are documents that show that my nickname is one by which I am generally known or one that I have used as a part of my legal name. List the title of any documents or affidavits from other persons reflecting that the candidate is generally known by the nickname or that it has been used as part of the candidate's legal name.

A. City of Miami Oath of Office

B. FPL bill

C. 2017 Election Ballot

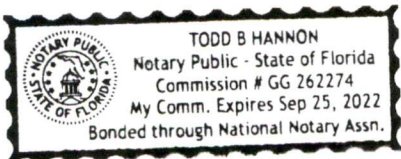
Manuel E. Reyes

Printed /Typed Name of Affiant

Manuel E. Reyes

Signature of Affiant

Sworn to me this 6<sup>th</sup> day of September 2019.



Todd B. Hannon

Notary Public

Todd B. Hannon

Printed Name

Sept. 25, 2022

My Commission Expires

Personally known

or Produced Identification

Type of Identification Produced: FL Driver's License

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CITY OF MIAMI




# Oath Of Office

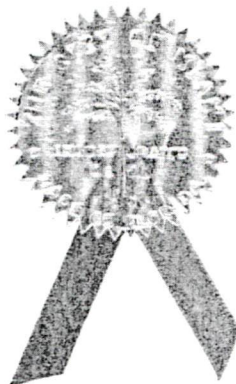
## Office Of The City Clerk

I, Manolo Reyes, do solemnly swear that I will support, protect, and defend the Constitution and Laws of the United States of America, and of the State of Florida, and the Charter of the City of Miami, and in all respects, faithfully discharge the duties of District 4 Commissioner of the City of Miami, Miami-Dade County, Florida. To my colleagues and to all of those I represent and serve, I pledge fairness, integrity, and civility in all actions taken and all communications made by me as a public servant.

  
Affiant

Sworn to and subscribed before me this  
fifteenth day of November, 2017.

  
Todd B. Hannon  
City Clerk



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CITY OF MIAMI

	<p><b>Proposals Propuestas Pwopozisyon</b></p>	<p><b>Proposed Charter Amendment allowing Aligned Bayshore (Monty's) a Lease extension providing additional rent and investments</b></p> <p>Shall Miami's Charter be amended to extend Aligned Bayshore Marina, LLC's ("Monty's") Lease, requiring Commission to waive competitive bidding, under these terms:</p> <ul style="list-style-type: none"> <li>• 32-year lease extension plus two 10-year options;</li> <li>• Monty's to pay the City \$10,000,000.00 in additional rent or an additional 1.75% of gross revenues, whichever is greater, but no less than \$1,500,000.00 per year beginning in 2019; and</li> <li>• Monty's contributes \$7,500,000.00 in property improvements and a minimum of \$4,000,000.00 for future improvements?</li> </ul> <p><b>Enmienda propuesta a la Carta Constitucional para permitir una prórroga del Contrato de Arrendamiento a Aligned Bayshore (Monty's) de modo de disponer alquiler e inversiones adicionales</b></p> <p>¿Deberá enmendarse la Carta Constitucional de Miami a fin de prorrogar el contrato de arrendamiento de Aligned Bayshore Marina, LLC ("Monty's") para exigir que la Comisión excluya la licitación competitiva, según estas condiciones:</p> <ul style="list-style-type: none"> <li>• Prórroga del Contrato de Arrendamiento por 32 años más dos opciones de 10 años;</li> <li>• que Monty's pague a la Ciudad \$10,000,000.00 por concepto de alquiler adicional o 1.75% adicionales por ingresos brutos, el que sea mayor, pero no menos de \$1,500,000.00 al año, a partir de 2019; y</li> <li>• que Monty's contribuya con \$7,500,000.00 para mejoras a la propiedad y con un mínimo de \$4,000,000.00 para mejoras futuras?</li> </ul> <p><b>Amanman ki Pwopoze nan Konstitisyon an ki akode Aligned Bayshore (Monty's) yon pwolongasyon Kontra Lokasyon ki ofri plis lwaye ak envestisman</b></p> <p>Eske Konstitisyon Miami an dwe amande pou pwolonje Kontra Lokasyon Aligned Bayshore Marina, LLC ("Monty's") la, ki egzij pou Komisyon an renonse a apel d'of, selon tem sa la yo:</p> <ul style="list-style-type: none"> <li>• Pwolongasyon kontra lokasyon an sou 32 lane plis de (2) opsyon 10 lane;</li> <li>• Monty's dwe peye Vil la \$10,000,000.00 an lwaye anplis oswa 1.75% revni brit anplis, kekeswa sa ki pi wo a, men pa mwens pase \$1,500,000.00 pa ane apati 2019; api</li> <li>• Monty's ap kontribye \$7,500,000.00 nan amelyorasyon pwopriyete ak yon minimòm \$4,000,000.00 pou amelyorasyon nan la yo?</li> </ul>
	<p><b>Authorizing General Obligation Bonds for Capital Projects in an aggregate principal amount not exceeding \$400,000,000.00</b></p> <p>Shall the City issue General Obligation Bonds in an aggregate principal amount not exceeding \$400,000,000.00 with interest payable at or below the maximum rate allowed by law, payable from ad valorem taxes levied on all taxable property in the City, provided that the capital projects debt millage not exceed the current rate of 0.5935, to:</p> <ul style="list-style-type: none"> <li>• Reduce Flooding Risks; Improve Stormwater Infrastructure;</li> <li>• Improve Affordable Housing;</li> <li>• Economic Development; Parks, Cultural Facilities, Streets, and Infrastructure;</li> <li>• Enhance Public Safety?</li> </ul> <p><b>Autorización de bonos de obligación general para proyectos de capital por un monto total agregado que no supere los \$400,000,000.00</b></p> <p>¿Deberá la Ciudad emitir bonos de obligación general por un monto total agregado que no supere los \$400,000,000.00 con una tasa de interés máxima, o inferior, permitida por la ley pagaderos de los impuestos ad valorem sobre todos los bienes raíces objeto de tributación de la Ciudad, siempre que el amillaramiento de la deuda de proyectos de inversión no supere la tasa actual de 0.5935, para:</p> <ul style="list-style-type: none"> <li>• La reducción de riesgos de inundación; el mejoramiento de la infraestructura para aguas pluviales;</li> <li>• El mejoramiento de viviendas económicas, el desarrollo económico, parques, centros culturales, vías públicas e infraestructura;</li> <li>• El reforzamiento de la seguridad pública?</li> </ul> <p><b>Otorizasyon Bon ak Responsabilite Jeneral pou Pwoje Envestisman nan yon montan total kapital ki pa depase \$400,000,000.00</b></p> <p>Eske Vil la dwe emet Bon ak Responsabilite Jeneral nan yon montan total kapital ki pa depase \$400,000,000.00 avèk enterè peyab a oswa pi ba lo maksimòm lawa ofonze a ki peyab avèk taks sou vale ki preve sou tout pwopriyete ki kapab taksé nan Vil la, depi to pa mi det pwòje envestisman yo pa depase lo aktyèl 0.5935 la, pou:</p> <ul style="list-style-type: none"> <li>• Redwi Danje Inondasyon; Amelyore Enfrastrikti pou Dio Lapi;</li> <li>• Amelyore Lojman Bon Macha, Kwasans Ekonomik, Pak yo, Etablisman Kiltirèl yo, Lan yo, ak Enfrastrikti;</li> <li>• Amelyore Sekirite Pibik?</li> </ul>	
	<p><b>CITYWIDE PARA TODA LA CIUDAD TOUT VIL LA</b></p>	
	<p><b>Mayor Alcalde Majistra (Vote for 1) (Vote por 1) (Vote pou 1)</b></p>	
	<p><input type="radio"/> Williams Alfred Ambrister Sr 85</p> <p><input type="radio"/> Christian Canache 86</p> <p><input type="radio"/> Cynthia Jacquith 87</p> <p><input type="radio"/> Francis X. Suarez 88</p>	
	<p><b>DISTRICT WIDE PARA TODO EL DISTRITO TOUT DISTRIK LA</b></p>	
	<p><b>Commissioner - District 4 Comisionado - Distrito 4 Komisyone - Distrik 4 (Vote for 1) (Vote por 1) (Vote pou 1)</b></p>	
	<p><input type="radio"/> Manolo Reyes 97</p> <p><input type="radio"/> Raiph Rosado 98</p> <p><input type="radio"/> Denise Garvez Turros 99</p>	
	<p><input type="radio"/> For Bonds 120 A favor de los bonos Pou Bon yo</p> <p><input type="radio"/> Against Bonds 121 En contra de los bonos Kontr Bon yo</p>	<p><input type="radio"/> Yes/Si/Wi 122</p> <p><input type="radio"/> No/No/Non 123</p>

*[Handwritten Signature]*  
10/4/17  
Approved



/ 27



Please request changes on the back. Notes on the front will not be detected.

The amount enclosed includes the following donation:

FPL Care To Share

\$

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CITY OF MIAMI

B 2,4,6,7,8 8511 9

AUTO \*\*CO 3416 040060



MANUEL E REYES  
C/O MANOLO REYES  
5301 SW 7TH ST  
CORAL GABLES FL 33134-1159

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

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001



Account number	Total amount you owe	New charges due by	Amount enclosed
[REDACTED]	\$279.82	Sep 05 2019	\$

### Your electric statement

Account number: 22644-35062

For: Jul 16 2019 to Aug 15 2019 (30 days)  
Customer name: MANUEL E REYES  
Service address: 5301 SW 7TH ST

Statement date: Aug 15 2019  
Next meter reading: Sep 16 2019

Amount of your last bill	Payments (-)	Additional activity (+ or -)	Balance before new charges (=)	New charges (+)	Total amount you owe (=)	New charges due by
324.35	324.35 CR	0.00	0.00	279.82	\$279.82	Sep 05 2019

#### Meter reading - Meter ACD1040

Current reading 17162  
Previous reading - 14878  
kWh used **2284**

Amount of your last bill 324.35  
Payment received - Thank you 324.35 CR  
Balance before new charges \$0.00

#### Energy usage

	Last Year	This Year
kWh this month	2180	2284
Service days	30	30
kWh per day	73	76

#### New charges (Rate: RS-1 RESIDENTIAL SERVICE)

Electric service amount	238.21**
Gross receipts tax	6.11
Franchise charge	14.43
Utility tax	21.07
<b>Total new charges</b>	<b>\$279.82</b>

#### \*\*The electric service amount includes the following charges:

Customer charge: \$8.28  
Fuel: \$63.70  
Non-fuel: \$166.23  
(First 1000 kWh at \$0.022270)  
(Over 1000 kWh at \$0.032270)  
(First 1000 kWh at \$0.066850)  
(Over 1000 kWh at \$0.077400)

**Total amount you owe \$279.82**

- Payments received after **September 05, 2019** 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.
- **Don't let the summer heat up your bill.** During the summer your A/C works longer. Set your thermostat to 78 degrees to save money. Learn more at FPL.com/SummerIsHere.
- The storm charge on your August bill was removed to reflect final payment of bonds issued during the 2004 and 2005 hurricane restoration effort. There will be a true-up on a future bill, subject to Florida Public Service Commission approval. Learn more: FPL.com/rates.

Please have your account number ready when contacting FPL.

Customer service: (305) 442-8770  
Outside Florida: 1-800-226-3545  
To report power outages: 1-800-4OUTAGE (468-8243)  
Hearing/speech impaired: 711 (Relay Service)  
Online at: [www.FPL.com](http://www.FPL.com)



**FORM 1**

**STATEMENT OF FINANCIAL INTERESTS**

**2018**

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :  
**Reyes Manuel (Manolo) E.**

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MAILING ADDRESS :  
**3500 Pan American Drive**

OFFICE OF THE CITY CLERK  
 CITY OF MIAMI

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CITY : **Miami** ZIP : **33133** COUNTY : **Miami-Dade**

NAME OF AGENCY :  
**City of Miami**

NAME OF OFFICE OR POSITION HELD OR SOUGHT :  
**Commissioner, District 4**

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

\*\*\*\* **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, 2018 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
Miami Dade Public Schools	1700 Biscayne Blvd, Miami, Florida	Teacher
City of Miami	3500 Pan American Drive	Commissioner Dist. 4
Social Security		Retirement
FRS Retirement		Retirement form MDCPS

**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
N/A			

**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
Cash	Savings Account / Ocean Bank
Stocks	Scottrade / TIRA-CREF

PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")	
NAME OF CREDITOR	ADDRESS OF CREDITOR
BB&T Bank	Coral Gables, Florida
Space Coast Credit Union	Melbourne, Florida

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")		
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	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: \_\_\_\_\_  
*Manuel E. Lopez*

Date Signed: \_\_\_\_\_  
6/26/2019

**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:**

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. To determine what category your position falls under, see page 3 of instructions.

**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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

**State officers or specified state employees** who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

**Candidates** file this form together with their filing papers.

**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.

**WHEN TO FILE: 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.

**Candidates** must file at the same time they file their qualifying papers.

**Thereafter,** file by July 1 following each calendar year in which they hold their positions.

**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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2018.

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 CITY OF MIAMI  
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 CITY OF MIAMI

**Statement of Financial Interests 2018**

**Form 1 (CONT'D)**

**Name:** Commissioner Manuel (Manolo) Reyes, District 4

**Name of Office of Position held or sought:** CONT'D

- Southeast Overtown/Park West CRA
- Midtown CRA
- Omni CRA

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2019 JUN 26 PM 12: 15

OFFICE OF THE CITY CLERK  
CITY OF MIAMI



LOYALTY OATH

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

I, Manuel E. Reyes  
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.

*Manuel E. Reyes*  
Signature of Candidate

CITY OF MIAMI OATH OF CANDIDATE

OFFICE OF City of Miami Commissioner, District 4

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

Manuel E. Reyes

(PLEASE PRINT NAME)

who, being sworn, says he/she is a candidate for the office of City of Miami Commissioner, District 4, 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.

*Manuel E. Reyes*  
Signature of Candidate

5301 SW 7 Street Miami FL 33134  
Address City State ZIP Code

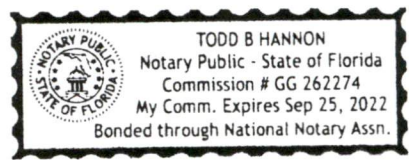
The Loyalty Oath and Oath of Candidate are sworn to (or affirmed) and subscribed before me this 6<sup>th</sup> day of September, 2019.

*[Signature]*  
Signature of Officer Administering Oath or Notary Public

Todd B. Hannon  
Name of Notary Typed, Printed or Stamped

Personally Known: \_\_\_\_\_ OR Produced Identification:

Type of Identification Produced: FL Driver's License



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**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, Manuel E. Reyes, a candidate for the office of  
please print your name  
City of Miami Commissioner, District 4 in Miami, FL  
elective office sought county, municipality, or other jurisdiction

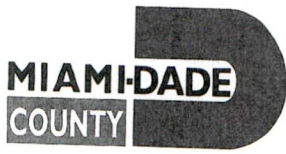
acknowledge that the Mandatory Fair Campaign Practices as provided in the Miami-Dade County Code at Sec. 2-11.1.1 (C)(1) applies to me throughout this campaign period, regardless of when I sign this acknowledgment. I recognize as compulsory the jurisdiction of the Ethics Commission. The Ethics Commission 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.

  
Signature

9/6/2019  
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 87<sup>th</sup> Ave. *or* P.O. Box 521550  
Miami, FL 33172 Miami, FL 33152-1550



Elections  
2700 NW 87th Avenue  
Miami, Florida 33172  
T 305-499-8683 F 305-499-8547  
TTY 305-499-8480

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miamidade.gov

OFFICE OF THE CITY CLERK  
CITY OF MIAMI

August 14, 2019

Todd B. Hannon  
City Clerk  
City of Miami  
3500 Pan American Drive  
Miami, FL 33133

Dear Mr. Hannon:

The Miami-Dade Elections Department has completed the verification of the petitions for Manuel (Manolo) Reyes, a candidate for District 4 Commissioner of the City of Miami. A total of 550 petitions were reviewed for verification; of which 512 were certified.

For purposes of signature verification, my office follows the directives given by the municipality. You are encouraged to ensure compliance with municipal charter or code requirements.

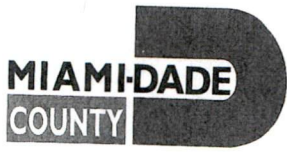
Please find the certification for the petition enclosed. Should you have any questions or concerns, please feel free to contact Michelle McClain, Deputy Supervisor of Elections for Voter Services at 305-499-8302.

Sincerely,

Christina White  
Supervisor of Elections

Enclosure (1)

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CITY OF MIAMI



Elections  
2700 NW 87th Avenue  
Miami, Florida 33172  
T 305-499-8683 F 305-499-8547  
TTY 305-499-8480

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### CERTIFICATION

#### Batch 1

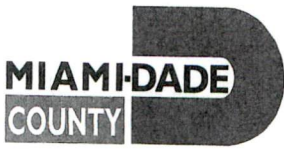
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OFFICE OF THE CITY CLERK  
CITY OF MIAMI

STATE OF FLORIDA)  
COUNTY OF MIAMI-DADE)

I, Christina White, Supervisor of Elections of Miami-Dade County, Florida, do hereby certify that **512** signatures submitted by **Manuel (Manolo) Reyes** for the office of **District 4 Commissioner** for the **City of Miami** matched the signatures on the voter files.

WITNESS MY HAND  
AND OFFICIAL SEAL,  
AT MIAMI, MIAMI-DADE  
COUNTY, FLORIDA,  
ON THIS 14th DAY OF  
AUGUST, 2019

Christina White  
Supervisor of Elections



**Elections**  
2700 NW 87th Avenue  
Miami, Florida 33172  
T 305-499-8683 F 305-499-8547  
TTY 305-499-8480

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OFFICE OF THE CITY CLERK  
CITY OF MIAMI

August 14, 2019

Todd B. Hannon  
City Clerk  
City of Miami  
3500 Pan American Drive  
Miami, FL 33133

Dear Mr. Hannon:

The Miami-Dade Elections Department has completed the verification of the petitions for Manuel (Manolo) Reyes, a candidate for District 4 Commissioner of the City of Miami. A total of 80 petitions were reviewed for verification; of which 75 were certified.

For purposes of signature verification, my office follows the directives given by the municipality. You are encouraged to ensure compliance with municipal charter or code requirements.

Please find the certification for the petition enclosed. Should you have any questions or concerns, please feel free to contact Michelle McClain, Deputy Supervisor of Elections for Voter Services at 305-499-8302.

Sincerely,

Christina White  
Supervisor of Elections

Enclosure (1)

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CITY OF MIAMI





Elections  
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Miami, Florida 33172  
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TTY 305-499-8480

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CITY OF MIAMI

### CERTIFICATION

### Batch 2

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CITY OF MIAMI

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I, Christina White, Supervisor of Elections of Miami-Dade County, Florida, do hereby certify that 75 signatures submitted by Manuel (Manolo) Reyes for the office of District 4 Commissioner for the City of Miami matched the signatures on the voter files.

WITNESS MY HAND  
AND OFFICIAL SEAL,  
AT MIAMI, MIAMI-DADE  
COUNTY, FLORIDA,  
ON THIS 14th DAY OF  
AUGUST, 2019

Christina White  
Supervisor of Elections

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CITY OF MIAMI

THE REVERSE SIDE OF THIS DOCUMENT INCLUDES MICROPRINTED ENDORSEMENT LINES AND ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

MANOLO REYES CAMPAIGN ACCOUNT  
2828 CORAL WAY, SUITE 400  
MIAMI, FL 33145

IBERIABANK  
MIAMI, FL 33125

156

PAY  
TO THE  
ORDER OF

City of Miami

DATE 9/6/19

\$ 682.00

Six Hundred Eighty Two ——— 00/100 ———

DOLLARS

MEMO Qualifying Fees 2019

*Jean E. King*

AUTHORIZED SIGNATURE



City of Miami  
OFFICIAL RECEIPT

No. 500686

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

Date: 9/6/2019

Six hundred and eighty two ——— xx/100 /100 Dollars

Received from: Manuel E. Reyes (Manolo Reyes) Campaign

Address: 2828 Coral Way, Suite 400

For: Qualifying

Reference No: Check # 156

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