

AFFIDAVIT OF CANDIDATE

CITY OF MIAMI, FLORIDA

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2019 SEP 16 PM 3:52

OFFICE OF THE CITY CLERK
CITY OF MIAMI

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

Eleazar Meléndez (hereinafter "affiant"), being first duly sworn, deposes and says:

1. My name is Eleazar Meléndez.
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 1 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. 545.

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

1861 NW South River Drive, 1802, Miami, FL 33125

which is my legal address, and I have resided continually at said address from the 15 day of April, 2017 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

555 NE 15 Street, 508

December 31, 2013 to April 15, 2017

Miami, FL 33132

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):

N/A

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CITY OF MIAMI

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:

Codorniz, Inc

1861 NW South River Drive, 1802

10. Affiant's occupation: Communications Consultant, Miami, FL, 33125

Affiant's business telephone number(s): (212) 729-6672

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

For the past two years May 7, 2018 to present

(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

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.

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

Politique, 2665 S Bayshore Drive, 810B, Miami FL 33133

Affiant's campaign treasurer's name:

Eleazar Melendez

Affiant's campaign treasurer's address:

1861 NW South River Drive, 1802, Miami, FL 33125

Telephone numbers: (work) (212) 729-6672

(home) (212) 729-6672

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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: Eleazar Meléndez

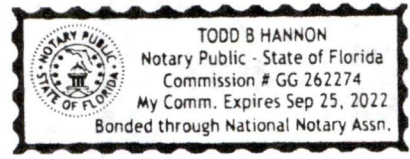
SIGNED THIS 16th DAY OF September, 2019.

[Signature]
AFFIANT

BEFORE ME, the undersigned authority, personally appeared Eleazar David Melendez Dominguez, 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

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

FOR OFFICE USE ONLY:

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OFFICE OF THE CITY CLERK
CITY OF MIAMI

LAST NAME -- FIRST NAME -- MIDDLE NAME :
Meléndez Eleazar David

MAILING ADDRESS :
1861 NW South River Drive, 1802

CITY : Miami ZIP : 33125 COUNTY : Miami Dade

NAME OF AGENCY :
City of Miami

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
City of Miami Commission, District 1

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
Politique LLC	2665 S Bayshore Dr, 810B, Miami, FL	Political Campaigns
Florida Democratic Party	214 S Bronough St, Tallahassee, FL	Political Party
Codorniz Inc	1861 NW S River Dr, 1802, Miami, FL	Communications Consulting

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
Resilience System LLC	Client	1659 NE 110 Terrace	sustainability consulting
BNA	Client	2017 Biscayne Blvd	neighborhood assoc.

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

<i>n/a</i>

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
401K Account	Personal

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
Citibank	388 Greenwich Street, New York, NY 10013
Lending Club Corporation	Dept. 34268, P.O. Box 39000, San Francisco, CA 94139

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
Codorniz Inc	N/A	
ADDRESS OF BUSINESS ENTITY	1861 NW South River Drive, 1802, Miami, FL 33125	
PRINCIPAL BUSINESS ACTIVITY	Eleazar Meléndez	
POSITION HELD WITH ENTITY	Principal	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%	
NATURE OF MY OWNERSHIP INTEREST	100% ownership	

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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 / 16 / 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.

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Do not use this form if a Judicial or School Board Candidate)

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

Write-in candidate

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OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Eleazar Meléndez

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

I am a candidate for the nonpartisan office of City of Miami Commissioner, 1
(Office) (District #)

N/A, N/A; 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 121247695

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]

E-L-E-AH-ZH-AH-R ME - LEN - DEZ

X [Signature] (212) 729-6672 info@melendezformiami.com
Signature of Candidate Telephone Number Email Address

1861 NW South River Drive, 1802 Miami FL 33125
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Miami Dade

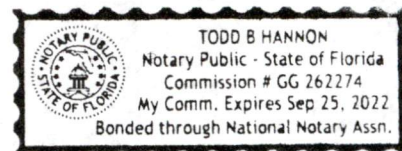
[Signature]
Signature of Notary Public

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

Sworn to (or affirmed) and subscribed before me this 16th
day of September, 2019.

Personally Known: _____ or Produced Identification:

Type of Identification Produced: FL Driver's License



LOYALTY OATH

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

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CITY OF MIAMI

I, Eleazar D Meléndez
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.

[Signature]
Signature of Candidate

CITY OF MIAMI OATH OF CANDIDATE

OFFICE OF City of Miami Commission District One

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

Eleazar Meléndez

(PLEASE PRINT NAME)

who, being sworn, says he/she is a candidate for the office of City Commission District 1, 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.

[Signature]
Signature of Candidate

1861 NW South River Drive, 1802 Miami FL 33125
Address City State ZIP Code

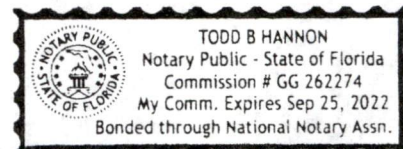
The Loyalty Oath and Oath of Candidate are sworn to (or affirmed) and subscribed before me this 16th day of September, 2019.

[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



**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, Eleazar Meléndez, a candidate for the office of
please print your name
City of Miami Commission, D1 in Miami Dade 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

9/16/2019
 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 87th Ave. *or* P.O. Box 521550
 Miami, FL 33172 Miami, FL 33152-1550

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ELEAZAR MELENDEZ FOR CITY COMMISSION
1861 NW S RIVER DRIVE SUITE 1802
MIAMI, FL 33125

1065
63-9138/2631

Date: 9/16/2019

PAY to the order of City of Miami \$ 682.00
Six hundred and eighty-two Dollars

BB&T BRANCH BANKING AND TRUST COMPANY
1-800-BANK BBT BBT.com

For qualifying fees

Photo Safe Deposit*
Details on back

COLONIAL CLASSIC®



City of Miami
OFFICIAL RECEIPT

No. 500707
Date: 9/16/19

\$ 682.00 Sales Tax \$ - Total \$ 682.00
Six hundred and eighty two xx/100 /100 Dollars

Received from: Eleazar Melendez For Commission Campaign
Address: 1861 NW River Drive #1802 Miami FL 33125

For: Qualifying Reference No: Check # 1065

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



FPL
GENERAL MAIL FACILITY
MIAMI FL 33188-0001

ELEAZAR MELENDEZ
1861 NW SOUTH RIVER DR UNIT 1802
MIAMI FL 33125-2736

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OFFICE OF THE CITY CLERK
CITY OF MIAMI

May 22, 2018 Electric Bill

For: Apr 26, 2018 to May 22, 2018 (26 days)

Service Address
1861 NW SOUTH RIVER DR UNIT 1802
MIAMI, FL 33125

Account Number [REDACTED]

Questions? Contact Us
Reliable energy is affordable energy.
Learn how we save you money at fpl.com/savings

Hello Eleazar Melendez,
Here's what you owe for this billing period.

Payments	-\$196.00
Additional Activity	\$196.00
New charges due by Jun 12, 2018	\$41.27
Total amount you owe	\$41.27

Payment received - Thank you	-196.00
Additional activity	
Deposit Balance Due	196.00
Balance before new charges	\$0.00
NEW CHARGES	
Rate: RS-1 RESIDENTIAL SERVICE	
Electric service amount	24.45
Storm charge	0.28
Gross receipts tax	0.63
Franchise charge	1.53
Utility tax	2.38
Taxes and charges	4.82
Service Charge	12.00
Total new charges	\$41.27
Total amount you owe	\$41.27

Meter Summary

Meter reading - Meter AED1366 Next meter reading Jun 21, 2018
Current reading 41920
Previous reading -41720

kWh used 200

Energy Usage Comparison

This Month	
Service to	May 22, 2018
kWh Used	200
Service days	26
kWh/day	8
Amount	\$29.27

Keep In Mind

- Thank you for enrolling in the FPL E-Mail Bill program. Now that you are participating, THIS WILL BE THE LAST PAPER BILL YOU RECEIVE FROM FPL. You will be notified of future bills by e-mail.
- Payments received after June 12, 2018 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.
- This billing period is less than a month; bill factors are available upon request.
- We've installed a smart meter on your property and it's ready to give you information--by the month, day and hour--about your energy use. For more information about the benefits, including how the smart meter will be read remotely, visit www.FPL.com/smartmeter.
- The Service/Initial Charge is a one-time charge to defray administrative costs required to start your electric service or to make a change to your account at your request.
- The Florida Public Service Commission is reviewing a routine storm charge adjustment that would apply to your bill beginning in June. To learn more about your energy bill, visit FPL.com/rates.

Download the app



Your fingerprint will give you instant, secure access to your account.
[Get it now](#)

Meter tampering is a crime



When someone tampers with a meter, it adds to our costs and affects everyone's bills.
[Report it](#)

Ask the Expert



What are the benefits of smart light bulbs compared to LED bulbs?
[Get the answer](#)

Useful Links

- [Billing and service details](#)
- [Energy News](#)
- [View back of the bill](#)

Important Numbers

- | | |
|--------------------------|--------------------------|
| 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) |



FPL
GENERAL MAIL FACILITY
MIAMI FL 33188-0001

Aug 21, 2019 Electric Bill

For: Jul 22, 2019 to Aug 21, 2019 (30 days)

Service Address
1861 NW SOUTH RIVER DR UNIT 1802
MIAMI, FL 33125

Account Number [REDACTED]

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CITY OF MIAMI

ELEAZAR MELENDEZ
1861 NW SOUTH RIVER DR UNIT 1802
MIAMI FL 33125-2736

Questions? Contact Us
Reliable energy is affordable energy.
Learn how we save you money at fpl.com/savings

Hello Eleazar Melendez,
***This \$96.85 is PAST DUE -- PLEASE PAY IMMEDIATELY**

Amount of your last bill	\$96.85
New charges due by Sep 11, 2019	\$42.92
Total amount you owe	\$139.77

Amount of your last bill	96.85
Balance before new charges	\$96.85 *
NEW CHARGES	
Rate: RS-1 RESIDENTIAL SERVICE	
Customer charge:	\$8.28
Non-fuel: (First 1000 kWh at \$0.066850) (Over 1000 kWh at \$0.077400)	\$17.85
Fuel: (First 1000 kWh at \$0.022270) (Over 1000 kWh at \$0.032270)	\$5.95
Electric service amount	32.08
Gross receipts tax	0.82
Franchise charge	1.94
Utility tax	3.08
Taxes and charges	5.84
Late payment charge	5.00
Total new charges	\$42.92
Total amount you owe	\$139.77

Meter Summary

Meter reading - Meter AED1366 Next meter reading Sep 20, 2019
Current reading 45648
Previous reading -45381

kWh used 267

Energy Usage Comparison

	This Month	Last Month	Last Year
Service to	Aug 21, 2019	Jul 22, 2019	Aug 22, 2018
kWh Used	267	308	308
Service days	30	32	30
kWh/day	9	10	10
Amount	\$37.92	\$42.74	\$40.66

Energy Usage History



Keep In Mind

- Payments received after September 11, 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.

Save up to \$137 with On Call

Receive a monthly credit on your bill by allowing FPL to occasionally cycle off appliances you chose.
[Start Saving](#)

Introducing the FPL Energy Analyzer

Now, for the first time, you can instantly see a breakdown of your energy costs and take control.
[Analyze Your Home](#)

Useful Links

- [Billing and service details](#)
- [Energy News](#)
- [View back of the bill](#)

Important Numbers

- Customer Service: (305) 442-6032
- Outside Florida: 1-800-226-3545
- To report power outages: 1-800-4OUTAGE (468-8243)
- Hearing/speech impaired: 711 (Relay Service)