

2021 APR 13 10 00 AM  
CITY OF CORAL GABLES  
CLERK OF COURTS


**CITY OF CORAL GABLES  
CERTIFICATE OF QUALIFICATION  
GENERAL BIENNIAL ELECTION  
APRIL 13, 2021**

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

I hereby certify that Maya Joli has filed in **Group II** as a candidate for the **Office of Commissioner** in the City of Coral Gables General Biennial Election to be held on April 13, 2021, and he/she has paid the Qualifying Fee and Election Assessment and has also submitted the documents listed herein below:

- |                                     |  |          |
|-------------------------------------|--|----------|
| <input checked="" type="checkbox"/> | City Qualifying Filing Fee for seat on Commission*   | \$200.00 |
| <input type="checkbox"/>            | State Assessment Fee for Mayor Group I<br>(Municipal Candidates; Elections Assessment)<br><i>One (1) percent of the annual salary<br/>\$40,761) of the office sought</i>           | \$407.61 |
| <input checked="" type="checkbox"/> | State Assessment Fee for Commissioner Group II<br>(Municipal Candidates; Elections Assessment)<br><i>One (1) percent of the annual salary<br/>\$33,121) of the office sought</i>   | \$331.21 |
| <input type="checkbox"/>            | State Assessment Fee for Commissioner Group III<br>(Municipal Candidates; Elections Assessment)<br><i>One (1) percent of the annual salary (\$33,121)<br/>Of the office sought</i> | \$331.21 |
| <input checked="" type="checkbox"/> | Form 1: Statement of Financial Interests (2020)  |          |
| <input checked="" type="checkbox"/> | Loyalty Oath / Oath of Candidate   |          |
| <input checked="" type="checkbox"/> | Biography / Resume   |          |
| <input checked="" type="checkbox"/> | Designation of Campaign Depository/ Appointment of Campaign Treasurer Form,<br>Qualified Elector, Citizenship and Residency affirmation form                                       |          |

- Declaration of Candidate Intent
- Statement of Candidate
- Proof of Residency
- Proof of Citizenship
- Acknowledgement by Candidates covered by the Mandatory Provision of the Miami-Dade Ethical Campaign Practices Ordinance
- Voluntary Statement of Campaign Practices
- Letter of Resignation (If applicable in Accordance with Resign to Run Law)

Received by   
 Date: 2/22/2021

Billy Y. Urquia  
 Supervisor of Elections for  
 Coral Gables, Florida

Sworn to and subscribed before me this 22<sup>nd</sup> day of FEBRUARY, 2021.

Personally known

Or Produced Identification \_\_\_\_\_

\_\_\_\_\_  
 (Type of Identification)

Notary Public - State of Florida **JORGE PINO**  
 Notary Public - State of Florida  
 Commission # GG 922546  
 My Comm. Expires Dec 28, 2023  
 Bonded through National Notary Assn.

My commission expires \_\_\_\_\_  
 \_\_\_\_\_  
 (Printed, typed, or stamped  
 Commission Name of Notary Public)

\*Note: If candidate cannot pay the filing fee of \$200.00 then candidate has to fill out Undue Burden Oath: Filing Fee Form.

**FORM 1**

**STATEMENT OF  
FINANCIAL INTERESTS**

**2020**

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

**FOR OFFICE USE ONLY:**

LAST NAME -- FIRST NAME -- MIDDLE NAME :  
 JOLI MAYRA NMN

MAILING ADDRESS :  
 700 JERONIMO DRIVE

CITY : ZIP : COUNTY :  
 CORAL GABLES FLORIDA MIAMI DADE

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :  
 CORAL GABLES COMMISSIONER GROUP II

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

FOR OFFICE USE ONLY:

**\*\*\*\* THIS SECTION MUST BE COMPLETED \*\*\*\***

**DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

**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
THE JOLI LAW FIRM PLLC	1221 BRICKELL AVENUE SUITE 1210 MIAMI, FLORIDA 33131	IMMIGRATION LAW PRACTICE

**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")

7720 CAMINO REAL E113, MIAMI FL CONDO

9686 FOUNTAINEBLEU BLVD. APT 205, MIAMI FL

700 JERNIMO DRIVE CORAL GABLES, FL

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

**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.

<b>PART D — INTANGIBLE PERSONAL PROPERTY</b> [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
NONE	

<b>PART E — LIABILITIES</b> [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")	
NAME OF CREDITOR	ADDRESS OF CREDITOR
LANDROVER FINANCIAL	P. O. BOX 78058 PHOENIX AZ 85062
SHELL.POINT MORTGAGE (CONDO)	P. O. BOX 740039 CINCINATI, OH 45274

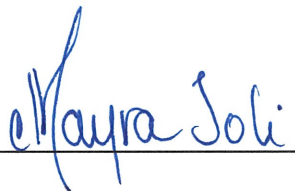
<b>PART F — INTERESTS IN SPECIFIED BUSINESSES</b> [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a")		
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY		
ADDRESS OF BUSINESS ENTITY	1221 BRICKELL AVENUE	
PRINCIPAL BUSINESS ACTIVITY	IMMIGRATION LAW	
POSITION HELD WITH ENTITY	OWNER	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	YES	
NATURE OF MY OWNERSHIP INTEREST	MY JOB	

**PART G — TRAINING** For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 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: \_\_\_\_\_  
 02/04/2021

**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), send it to CEFform1@leg.state.fl.us and retain a copy for your records. 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, 2020.



**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

NOTARY PUBLIC  
STATE OF FLORIDA  
COMMISSION # GG 355539  
EXPIRES: SEPTEMBER 14, 2023  
BONDED THRU NOTARY PUBLIC UNDERWRITERS

OFFICE USE ONLY

**Candidate Oath**

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

I, MAYRA JOLI

(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.)

am a candidate for the nonpartisan office of CORAL GABLES COMMISSIONER, \_\_\_\_\_, \_\_\_\_\_  
(Office) (District #)  
2, \_\_\_\_\_; 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): 109714872

**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.]

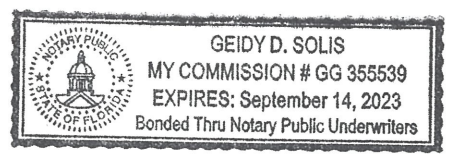
**X** Mayra Joli (305) 720-9021 MAYRA@JOLILAW.COM  
Signature of Candidate Telephone Number Email Address

700 JERONIMO DRIVE CORAL GABLES FL 33146  
Address City State ZIP Code

STATE OF FLORIDA  
COUNTY OF Miami Dade

Geidy D. Solis  
Signature of Notary Public  
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me this 4  
day of February, 2021.  
Personally Known:  or Produced Identification: \_\_\_\_\_  
Type of Identification Produced: \_\_\_\_\_



OFFICE USE ONLY

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

I, MAYRA JOLI ,

candidate for the office of CORAL GABLES COMMISSIONER 2 ;

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

X

  
Signature of Candidate

02/04/2021

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).

Dr. Mayra Joli

Mayra, a high-impact immigration attorney, TV Personality, writer, and founder of the Joli Law Firm PLLC, a Brickell based boutique firm, exclusively practices immigration law and is one of South Florida's most active immigration attorneys. She captures the people and allures the courts with her professional savvy and dynamic heart. Mayra Joli was born in the Dominican Republic. Mayra, an excellent wife, mother, attorney, and friend, is our very own "Jenny from the block", and she represents not only her native country, Mrs. Dominican Republic 2015, but also the neighborhood where she lives, Mrs. Coral Gables 2015; the city where she practices law Mrs. Miami 2015 and the coasts that embraces her island, Mrs. Caribbean Coast 2015. Her persona is stellar, and it encompasses being known, as an individual who allures her audience, is an ambassador for her nation, and an advocate for social justice, and as if this was not sufficient, she was elected Mrs. World Congeniality 2016 in Dongguan, China.

A true innovator and change agent: Miami Attorney Mayra Joli pioneered Fashion Night on Brickell, the annual fundraising event that generates charitable contributions for Dade Legal Aid, which in turn keeps their Pro Bono Project alive. Her efforts have single handedly maintained the spirit of philanthropy. And because of her intervention, Dade Legal Aid was able to continue advocating for vulnerable clients such as women and children victimized by a wide range of societal ills including domestic violence, abuse, neglect, child exploitation and trafficking. These clients, who otherwise could not afford professional legal services, gain identity, self-worth, and equality of rights.

Beyond beauty and beyond her law degree, Mayra is a TV personality and writer. And within this public domain is where you find her mission come to life. One can easily identify that she is a strong voice for the vulnerable. She cares deeply and compassionately for children's causes and is a powerful force to be reckoned with within her community and sphere of influence. Cultivating a personal sense of style, she dreams of a social platform, which enables her to walk confidently and speak affectionately behind the most pressing issues tugging her heart.

She furthers her mission and cause of vulnerable children by partnering with other well-established non-profits. Casa Valentina, one of many, is an organization that exists to provide foster care and at-risk youth with compassion, love of family, and life skills training. Her strong support help to empower these strong citizens to become valuable contributors to our society. Mayra states that, "My participation in these philanthropic pursuits is for individuals and organizations to find their voice through me, to open doors for help, guidance, and direction. For me, this includes a social platform for advocacy to thrive. Our office is much like opening my living room, we enjoy laughter, move initiatives, and enjoy round table lunches." On an international scope, Mayra also partnered and advocated for Both Ends Burning, an organization that exists to empower social welfare reform and systems that enable high-risk children the right to a loving permanent family. Fashion Night on Brickell 2021 will raise funds to benefit Miami Rescue Mission.

Mayra Joli truly loves her community with her whole heart, soul, mind, and strength.



CORAL GABLES  
MAY 15 2021

**2021 GENERAL BIENNIAL ELECTION  
DECLARATION OF CANDIDATE INTENT,  
QUALIFIED ELECTOR AND RESIDENCY AFFIRMATION**

**State of Florida**

**County of** MIAMI DADE

**City of** MIAMI

I, MAYRA JOLI a qualified elector and resident of CORAL GABLES,

declare that I have been a continuous Coral Gables resident for at least a year proceeding the qualifying period.

I further declare that I am a candidate for COMMISSIONER 2,  
(Office) (Group Number)

in the General Biennial Election of 04/13/2021, and do hereby file my intent to run in  
(Month/Date/Year)

said election, and to pay the required qualification fee and election assessment in connection with same. (Attach proof of residency and qualified elector documentation).

**UNDER PENALTIES OF PERJURY, I HEREBY DECLARE THAT I HAVE READ THE FOREGOING DECLARATION OF INTENT FORM AND THAT THE FACTS STATED ARE TRUE.**

Mayra Joli  
SIGNATURE

2/4/21  
DATE

**DECLARATION FOR CANDIDATES NOT AUTOMATICALLY COVERED**

by the **Mandatory Provisions** of the  
Miami-Dade Ethical Campaign Practices Ordinance  
Miami-Dade County Code at 2-11.1.1(C) (1)

The Mandatory Fair Campaign Practices Ordinance at Sec. 2-11.1.1(C) of the Miami-Dade County Code extends to—

- Candidates, and their respective campaign staffs, for Miami-Dade Co. Commissioners or Mayor;
- Candidates, and their respective campaign staffs, for Miami-Dade Co. 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 Co. Property Appraiser.

Other candidates for elective office with a constituency in whole or in part in Miami-Dade Co. who are *not* required to comply with the Mandatory Fair Campaign Practices Ordinance *may* at any time declare that they agree to abide by the Mandatory Fair Campaign Practices Ordinance.

The Mandatory Fair Campaign Practices Ordinance states that a candidate 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 that exposes the person to hatred, contempt, or ridicule or causes the person to be shunned or 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 that exposes the person to hatred, contempt, or ridicule or causes the 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 its benefit; *or*
- (e) Knowingly file with the Ethics Commission a groundless or frivolous complaint against another candidate.

If you are not automatically covered by the Mandatory Fair Campaign Practices Ordinance, but you have a constituency in whole or in part in Miami-Dade County and you would like to abide by the Mandatory Fair Campaign Practices Ordinance, please sign and date below. Once signed, the Declaration is deemed irrevocable for the duration of the campaign.

I, MAYRA SOLI, a candidate for the office of

please print your name

Coral Gables Commissioner

elective office sought

in Miami Dade

county, municipality, or other jurisdiction

understand that I am not automatically bound by the Mandatory Fair Campaign Practices Ordinance of Miami-Dade Co. Nevertheless, I choose to abide by the Mandatory Fair Campaign Practices Ordinance and recognize the compulsory jurisdiction of the Ethics Commission and its authority to decide whether I have violated the ordinance at Sec. 2-11.1.1(C) of the County Code. I further understand that if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any.

x

MAYRA SOLI  
Signature

2/4/21  
Date



DECLARATION AND FIRST AMENDMENT WAIVER  
FOR CANDIDATES WHO AGREE TO COMPLY WITH  
THE VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES

**VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES**

As a candidate for public office in Miami-Dade County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore,

1. I shall not make my race, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
2. I shall not make my opponent's race, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
3. I will condemn any appeal to prejudice based on race, creed, national origin, religion, gender, physical disability, or sexual orientation.
4. I shall not, without just cause, attack or question my opponent's patriotism.
5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement.
6. I shall not tolerate my supporters engaging in these activities that I condemn, nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group that resorts to the methods and tactics I condemn.
7. I shall run a positive campaign emphasizing my qualifications for office and positions on issues of public concern.
8. I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting that person's credibility.
10. I will take personal responsibility for approving or disavowing the substance of attacks on my opponent that may come from third parties supporting my candidacy.
11. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

**BY SIGNING THIS DECLARATION AND FIRST AMENDMENT WAIVER, I AGREE TO**

- **ABIDE BY THE VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES,**
- **SUBMIT TO THE COMPULSORY JURISDICTION OF THE ETHICS COMMISSION, AND**
- **WAIVE MY FIRST AMENDMENT RIGHTS.**

I, MAYRA JOLI, a candidate for the office of  
please print your name  
CORAL GABLES COMMISSIONER in MIAMI DADE COUNTY,  
elective office sought county, municipality, or other jurisdiction

agree to abide by the *voluntary* Statement of Fair Campaign Practices as provided in Section 2-11.1.1(D)(1) of the Code of Miami-Dade County, Florida, and to recognize as compulsory the jurisdiction of the Ethics Commission. I further agree that the Ethics Commission will have the authority to decide whether I have violated the *voluntary* Statement of Fair Campaign Practices and, if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any, which may include an admonition or public reprimand. I recognize that I have the right before signing this DECLARATION AND FIRST AMENDMENT WAIVER to consult my own legal counsel and to request and receive from the Ethics Commission an advisory opinion as to whether my planned campaign activities are likely to violate the *voluntary* Statement of Fair Campaign Practices. I also recognize that after signing this agreement, I will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that I may be considering. I hereby proclaim (1) that my agreement to abide by the Statement of Fair Campaign Practices is *voluntary*, knowing, and intelligent; (2) that I have not been forced, pressured, or otherwise coerced into making this agreement; and (3) that I am aware of the *voluntary* nature of this agreement. I recognize that there is no penalty for refusing to agree to abide by the *voluntary* Statement of Fair Campaign Practices. I also recognize that in signing this agreement, I will be forfeiting rights to which I would otherwise be entitled under the First Amendment to the U.S. Constitution and Article I, Section 4, of the Constitution of the State of Florida. Once the DECLARATION AND FIRST AMENDMENT WAIVER is signed, it is deemed irrevocable for the duration of the campaign.

x

Mayra Joli  
Signature

2/4/21  
Date



Voter Information Card  
Miami-Dade County, FL

Tarjeta de Información del Elector  
Condado de Miami-Dade, FL

Kat Enfòmasyon Votè  
Konte Miami-Dade, FL

ISSUED  
EMITIDA  
ENPRIME

Mayra Joli  
700 Jeronimo Dr  
Coral Gables FL 33146

05/12/17

Bring photo identification  
when voting.

Para votar, presente una  
identificación con fotografía.

Tanpri pote yon pyès idantifikasyon  
ki gen foto w sou li lè w'ap vin vote.

Registration No.  
Núm. de Inscripción  
Nim. Enskripsyon

109714872

Voting Location | Centro de Volación | Lokal Biwo Vòt  
Coral Gables Sr. High School  
450 Bird Rd

Precinct No.  
Núm. del Recinto  
Nim. Biwo Vòt

611

Date of Birth  
Fecha de Nacimiento  
Dat Nesans

10/7/1965

Registration Date  
Fecha de Inscripción  
Dat Enskripsyon

3/4/1997

Party Affiliation | Afiliación Partidista | Pati Politik

NO PARTY AFFILIATION

Christina White

Supervisor of Elections | Supervisora de Elecciones | Sipèvizè Eleksyon

You are eligible to vote for the representatives from the districts listed below.  
Ud. puede votar por los representantes de los distritos enumerados abajo.  
W elijib pou w vote pou reprezantan ki nan distrik ki ekri anba la yo.

Congress  
Congreso  
Kongrè

27

State Senate  
Senado Estatal  
Sena Eta a

37

State House  
Cámara Estatal  
Lachannm Eta a

114

County Commission  
Comision del Condado  
Komisyon Konte

7

School Board  
Junta Escolar  
Asanble Edikasyon

6

Community Council  
Consejo Comunitario  
Konsèy Kominoté

N/A

Municipality | Municipio | Minisipalite  
CORAL GABLES



City of Coral Gables  
City Clerk  
(305) 460-5351

014840-0002 Cynthia G 02/22/2021 02:08PM

**NOC**

Payment Tran Code: NOC,  
Lobbyists, Records and  
Notary Services (NOC)  
Description: Election  
Qualifying - Mayra Joli  
NOC, Lobbyists, Records  
and Notary Servi  
2020 Item: NOC  
NOC, Lobbyists, Records  
and Notary Services  
(NOC)

531.21

531.21

Subtotal  
Total

531.21  
531.21

CHECK  
Check Number

531.21

Change due

0.00

Paid by: Mayra Joli

CUSTOMER COPY

69-27/631 FL 937

DATE 2/4/21 \$ 531.21

PAY TO THE ORDER OF City of Coral Gables = five hundred thirty one Dollars 21/100- DOLLARS

Bank of America

FOR Commissioner/Qualifying fee

MP Mayra Joli

Security Deposit on Bank