

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

FEB 26 AM 11:16

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

I hereby certify that Jackson Rip Holmes has filed in Group 1 as a candidate for the Office of Mayor 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:

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

2021 FEB 26 AM 11:16

- 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

*[Handwritten Signature]*

Date:

*2/26/2021*

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

Sworn to and subscribed before me this 26<sup>th</sup> day of February, 2021.

Personally known

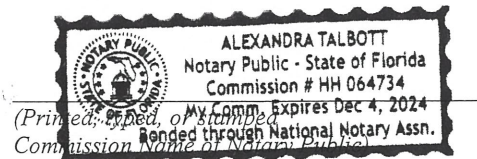
*[Handwritten Signature]*

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

Notary Public - State of Florida

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

My commission expires \_\_\_\_\_



\*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 :

Holmes, Jackson Rip

MAILING ADDRESS :

35 Sidonia Avenue, Apt B

Coral Gables, 33134 Miami-Dade [Florida]

CITY : ZIP : COUNTY :

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Mayor, Group I

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

CITY OF CORAL GABLES  
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**\*\*\*\* 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
256 Miracle Mile retail property	256 Miracle Mile, Coral Gables, FL	retail rent
Jeanie Holmes Trust	246-252 Miracle Mile, Coral Gbls, FL	retail rent

**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
Uber driver	Uber Technologies	San Francisco, CA	passenger transportation
Lyft driver	Lyft	San Francisco, CA	passenger transportation

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

256 Miracle Mile, Coral Gables, FL 33134  
 Jeanie Holmes Trust beneficiary, 246-252 Miracle Mile, Crl Gbls 33134

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.

**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

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
Mortgage, Bayview Financial	4465 Ponce de Leon, Coral Gables, FL 33134
Intrepid Financial	443 22 Street, Belleair Beach, FL 33786

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**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
	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		

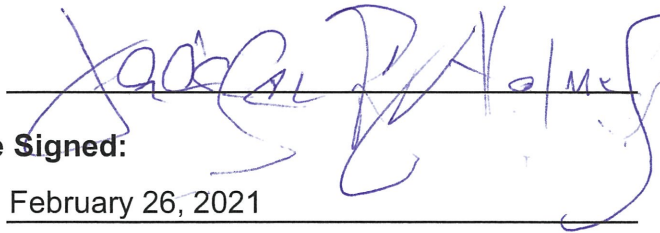
**PART G — TRAINING** For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S.

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:

February 26, 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 CEFom1@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

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2021 FEB 26 AM 11: 16

OFFICE USE ONLY

**Candidate Oath**

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

I, Jackson Rip Holmes

(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 City of Coral Gables - Mayor, \_\_\_\_\_, \_\_\_\_\_  
(Office) (District #)  
\_\_\_\_\_, 1; 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): 116449282

**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** Jackson Rip Holmes (305) 338-5000 rip.holmes@yahoo.com  
Signature of Candidate Telephone Number Email Address  
35 Sidonia Avenue, B, Coral Gables FL 33134  
Address City State ZIP Code

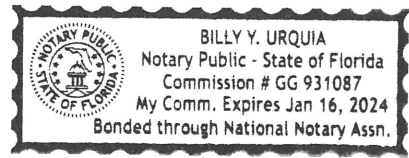
STATE OF FLORIDA  
COUNTY OF Miami-Dade

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

Sworn to (or affirmed) and subscribed before me this 26<sup>th</sup>  
day of February, 2021.

Personally Known:  or Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_



2021 FEB 22 PM 12: 56

Resume  
Jackson Rip Holmes

81 Tremont Street  
Hartford, Connecticut 06105

Phone: 203-236-4318

EDUCATION:

Pre-Law: B.A. with Honors in Psychology and Religion  
University of North Carolina at Chapel Hill  
1969-1975

Law: J.D., Holland Law School  
University of Florida at Gainesville  
1977-1980

HONORS AND ACTIVITIES:

Ski Consultant to Chip Carter, son of the 39th President  
of the United States, 1980.

Selected only American male ski instructor in St. Moritz,  
Switzerland. Winter, 1977.

Honors research, Honor Court, and Freshman Honors at  
the University of North Carolina, 1969-1975.

WORK EXPERIENCE:

Law: Law clerk, Moody and Bessent, P.A., 605 N.E.  
First Street, Gainesville, Florida 32609, 1979.

Legal researcher, Florida Legal Research, 2400  
S.W. 34 Street, Gainesville, Florida 32605, 1980

Non-Law: Ski instructor in North Carolina, Colorado, and  
Switzerland, 1972, 1976, and 1977.

Water ski instructor, lifeguard, and scuba  
instructor; Fort Lauderdale, Miami, and Key  
West, Florida; 1980, 1981, and 1982.

Taxi driver during preceding off-seasons.

PUBLICATIONS:

Ski Magazine, Inner Skier research, October,  
1976 and November, 1975, in articles by Morten  
Lund.

International Journal of Sport Psychology,  
Inner Skier research abstract, Via Camiluccia,  
Rome, Italy, Summer, 1977.

PERSONAL: Born in 1951 in Coral Gables, Florida  
Unmarried

REFERENCES: Jackson Peters, Judge, Box 1951, Woodland Park,  
Colorado 80866 \*\*\* William Sadowski, Attorney,  
1401 Brickell Avenue, Miami, Florida 33129 \*\*\*  
Former U.S. Sec'y of Commerce Juanita Kreps,  
Duke University, Durham, North Carolina 27706

Resume Update

2021 FEB 22 PM 12:56

Jackson Rip Holmes

Paralegal Work Experience:

1985-87 Personal injury law. Reference: Attorney  
Dan Friedland, 8312 Pioneer Road, West Palm Beach,  
Florida 33411.

1988-1991 Criminal defense law. Reference: Attorney  
Philip M. Moomaw, Springfield, Missouri.

Taxi Driving:

September, 1993 to the present, part-time for  
Bloomfield Yellow Cab, Ace/Vernon Taxi, Valley  
Cab, and United Cab in the Greater Hartford area.  
Featured or mentioned in three newspaper articles  
discussing the taxicab business during this period,  
two in the Hartford Courant, one in the Manchester  
Journal Inquirer.

Rental Car Industry:

Avis Rent-a-Car. Part-time driver from August, 1995 to  
May, 1996. Reference: Ed Bennett, Avis Rent-a-Car,  
Bradley Airport, Windsor Locks, Connecticut 06096.

Budget Rent-a-Car. Full-time counter rental sales agent  
at Bradley Airport facility from May, 1996 to December,  
1996. Favorably mentioned in Manchester Journal  
Inquirer article on the car rental business in October,  
1996. Reference: Manager Quentin Hall, 688-8699.

Real Estate:

Licensed real estate agent for Capitol Region Realty,  
Inc., 354 Main Street, Newington, Connecticut 06111.

Languages:

Fluent in both French and Spanish.

Additional References:

Joseph Fisher, C.P.A., 1511 Venera Avenue, Coral Gables,  
Florida 33146  
Congressman Alcee Hastings, U.S. House of Representatives,  
Washington, D.C. 20515

Resume Update 1998 to 2009

2021 FEB 22 PM 12:56

1998 – 2000

I moved back to South Florida from Connecticut, and did the following work.

1) South Beach taxi driver, and

2) property management of my family's 10 retail stores and tenants, along with Northern Trust Bank, Trustee. This job involved supervising 10 retail stores at 244-272 Miracle Mile, working with building repair people, working with realtors to get vacant spaces rented, doing accounting, and all other aspects of an ongoing business involving gross rents of over \$500,000 a year.

Accomplishments: raised occupancy rate from 40% to 100%, income from ~\$250,000 to ~\$750,000 annually.

2001-2004

I became a full-time assistant property manager, as above described, along with Northern Trust Bank, and Kerdyk Real Estate, in my capacity as Beneficiary, vested with the right to prevent legal waste. This work involved assistant managing and supervising our family's 10 retail stores, at 244-272 Miracle Mile in Coral Gables, including the 10 retail tenants. Those tenants were: 1) Creative Weddings, 2) Sole to Sole, 3) Guayaberas, 4) Rivoli Handbags, 5) Euroline Kitchens, 6) TD Waterhouse, 7) Ace Tuxedos, 8) Gables Gems, 9) Venus Clothing, and 10) Abitare Furniture.

2005-2009

I became owner of 256 Miracle Mile, involved in multi-faceted property management duties, including development of the Coral Gables downtown, insurance, taxation, publications, and commercial networking, on behalf of the family's now four stores. I worked part-time for Contigo Peru Magazine, involved myself extensively in City of Coral Gables issues, and was twice named by the Coral Gables Gazette as Activist of the Year.

References being prepared.

Jackson Rip Holmes  
920 Sevilla Avenue, #206  
Coral Gables, FL 33134  
Phone: 305-338-5000  
Fax: 305-442-2286  
E-mail: [holmesrip2@aol.com](mailto:holmesrip2@aol.com)



**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

CITY OF CORAL GABLES  
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**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

**OFFICE USE ONLY**

**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

Jackson Rip Holmes

**3. Address** (include post office box or street, city, state, zip code)

35 Sidonia Avenue, B  
Coral Gables, FL 33134

**4. Telephone**

(305 ) 338-5000

**5. E-mail address**

rip.holmes@yahoo.com

**6. Office sought** (include district, circuit, group number)

Mayor, Group I

**7. If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate.

**8. If a candidate for a partisan office, check block and fill in name of party as applicable:** My intent is to run as a

Write-In     No Party Affiliation     \_\_\_\_\_ Party candidate.

**9. I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Jackson Rip Holmes

**11. Mailing Address**

35 Sidonia Avenue, B

**12. Telephone**

( 305 ) 338-5000

**13. City**

Coral Gables

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33134

**17. E-mail address**

rip.holmes@yahoo.com

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

Wells Fargo

**20. Address**

2100 Ponce de Leon

**21. City**

Coral Gables

**22. County**

Miami-Dade

**23. State**

FL

**24. Zip Code**

33134

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

2-26-2021

**26. Signature of Candidate**

**X** 

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Jackson Rip Holmes, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

Nov 26, 2021

Date

**X** 

Signature of Campaign Treasurer or Deputy Treasurer

2021 GENERAL BIENNIAL ELECTION

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DECLARATION OF CANDIDATE INTENT,

QUALIFIED ELECTOR AND RESIDENCY AFFIRMATION

State of Florida

County of Miami-Dade

City of Coral Gables

I, Jackson Rip Holmes a qualified elector and resident of Coral Gables, FL,

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 Mayor 1,  
(Office) (Group Number)

in the General Biennial Election of 4/13/2021, 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.**

Jackson Rip Holmes  
SIGNATURE

2/26/21  
DATE

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

CITY OF TAMPA  
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OFFICE OF THE CITY CLERK

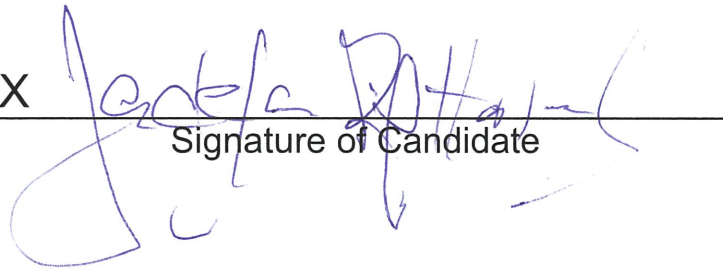
2021 FEB 26 AM 11:16

I, Jackson Rip Holmes,

candidate for the office of Mayor, Group I;

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

X

  
Signature of Candidate

Feb 26, 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).

**Dacosta, Susan**

CITY OF CORAL GABLES  
OFFICE OF THE CITY CLERK

**From:** Gonzalez, Sandra <Sandra.Gonzalez@fpl.com>  
**Sent:** Thursday, February 4, 2021 11:49 AM  
**To:** Dacosta, Susan  
**Cc:** Urquia, Billy; Maestri, Hector; Sanders, Kim  
**Subject:** FPL Letter of Authorization - City of Coral Gables Election/ JACKSON RIP HOLMES

2021 FEB 22 PM 10:57

**CAUTION:** External email. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning,

Thank you for your recent request for a letter of residence verification. Our records indicate that the account at 35 SIDONIA AVE APT B is currently under the name of JACKSON RIP HOLMES. This account was established on 12/12/16. Should you have any questions regarding this matter, please do not hesitate to contact us at 1-844-893-9892.

Thank you,  
**Sandra Gonzalez**  
Florida Power & Light Company  
TEL: 844-893-9892

**PLEASE REPORT ANY POWER EMERGENCIES (24/7) BY CONTACTING 1-800-4-OUTAGE**

Visit the new **FPL Project Portal** at [FPL.com/construction](https://www.fpl.com/construction) to manage your FPL Residential/Commercial construction projects. Get information on construction services and project types, apply for your construction project, track project milestones, manage your project team and more.

**THERE'S AN APP FOR THAT!**

**APPLE:** <https://itunes.apple.com/us/app/fpl/id1237328534?mt=8>

**SAMSUNG:** <https://play.google.com/store/apps/details?id=com.nee.fpl&hl=en>



# Voter Information Lookup

Please find your voter registration information below.

Full Name:	JACKSON RIP HOLMES
Street Address:	35 SIDONIA AVE APT B
City:	CORAL GABLES
Zip Code:	33134
County Name:	MIAMI-DADE
Voter Identification Number:	116449282
Date Of Registration:	7/25/2008
Party:	No Party Affiliation
Voter Status:	Active*

\*An active voter refers to a registered voter who is eligible to vote.

Access Ballot and Precinct Information available through your county Supervisor of Elections' website.

New Search

Please email [BVRSHelp@dos.myflorida.com](mailto:BVRSHelp@dos.myflorida.com) for website assistance.



Ron DeSantis, Governor  
Laurel M. Lee, Secretary of State



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CITY OF CORAL GABLES  
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City of Coral Gables  
City Clerk  
(305) 460-5351

014874-0003 Cynthia G 02/26/2021 11:17AM

**NOC**

Payment Tran Code: NOC,  
Lobbyists, Records and  
Notary Services (NOC)  
Description: Election  
Qualifying - Jackson Rip  
Holmes

NOC, Lobbyists, Records  
and Notary Servi

2021 Item: NOC

NOC, Lobbyists, Records  
and Notary Services  
(NOC)

607.61

607.61

Subtotal  
Total

607.61

607.61

CHECK

Check Number

607.61

Change due

0.00

Paid by: Jackson Rip Holmes

CUSTOMER COPY

CITY OF CORAL GABLES  
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OFFICE OF THE CITY CLERK

2021 FEB 26 AM 11:17



2-26-21 Date

JACKSON RIP HOLMES

CITY OF CORAL GABLES \$ 607.61  
SIX HUNDRED SEVENTY AND 61/100

Pay to the  
Order of

WELLS  
FARGO

Wells Fargo Bank, N.A.  
Florida  
wellsfargo.com

For



Handwritten signature and initials



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