Erika Gonzalez-Santamaria

From: Erika Gonzalez-Santamaria
Sent: Thursday, February 23, 2023 9:31 AM
To: jaquelynms@gmail.com
Subject: Ballot Number for April 4, 2023

Good morning,

Your Ballot Number for the election is #53.

Thank you!

Erika Gonzalez-Santamaria, MMC, City Clerk
Office of the City Clerk
City of Miami Springs
201 Westward Drive
Miami Springs, Florida 33166
E: gonzaleze@miamisprings-fl.gov
T: (305) 805-5006
www.miamisprings-fl.gov

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

Elections
2700 NW 87th Avenue
Miami, Florida 33172

miamidade.gov

February 2, 2023

Erika Gonzalez, MMC, City Clerk
City of Miami Springs
201 Westward Drive
Miami Springs, FL 33166

Dear Ms. Gonzalez:

The Miami-Dade Elections Department has completed the verification of Batch 1 of the petitions for Jacky Bravo a candidate for City Council, Group II for the City of Miami Springs. A total of 96 petitions were reviewed for verification; of which 89 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)

Elections
2700 NW 87th Avenue
Miami, Florida 33172

miamidade.gov

CERTIFICATION
Batch 1

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I, Christina White, Supervisor of Elections of Miami-Dade County, Florida, do hereby certify that **89** signatures submitted by **Jacky Bravo** for the office of **City Council, Group II** for the **City of Miami Springs** matched the signatures on the voter files.

WITNESS MY HAND AND OFFICIAL SEAL, AT MIAMI, MIAMI-DADE COUNTY, FLORIDA, ON THIS 2nd DAY OF FEBRUARY, 2023

Christina White
Supervisor of Elections

MIAMI-DADE COUNTY

OFFICIAL RECEIPT

MIAMI-DADE COUNTY–FLORIDA City of Miami Springs

No. 8053551

RECEIVED FROM Jacky Bravo & Victor Vazquez

DATE 1 / 31 / 2023 (MONTH / DAY / YEAR)

ADDRESS _____ (STREET ADDRESS)

Miami Springs (CITY) _____ (STATE) _____ (ZIP)

CASH $ 20 . 10

CHECKS $ _____ . _____

AMOUNT OF: Twenty → DOLLARS, AND 10/100 CENTS

TOTAL $ 20 . 10

FOR PAYMENT OF: Signature Verification Petitions (210) Candidates

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.

DEPT.: Elections

BY: [signature]

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBOBJECT	AMOUNT

107.01-1 6/04

RECEIVED
JAN 12 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS
2023 FEB -8 PM 2:05

Group II

Jaquelyn Braw Campaign Account
1161 Ibis Avenue
Miami Springs, FL 33166

0099

1/12/2023 Date

63-751/631 10829

Pay to the Order of City of Miami Springs $ 85.00

Eighty Five 00/100 Dollars

Security Features Details on Back.

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

For Filing Fee 2023

Jaquelyn A. Braw

⑆063107513⑆ 7652262556⑈ 00099

Harland Clarke

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CITY OF MIAMI SPRINGS
*** CUSTOMER RECEIPT ***

Oper: MIASMBM Type: OC Drawer: 1
Date: 1/12/23 03 Receipt no: 530

Description	Quantity	Amount
FF	CC - CAMPAIGN FILING FEE 1.00	$85.00

FILING FEE

Tender detail		
CK CHECK	99	$85.00
Total tendered		$85.00
Total payment		$85.00

Trans date: 1/12/23 Time: 16:23:23

CITY OF MIAMI SPRINGS
2023 JAN 30 AM 10:53

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Elena Cusano Date / Fecha: 1/11/23	1117 Heron Ave. Miami Springs	9/13/78	
Kevin Cusano Date / Fecha: 1/17/23	1117 Heron Ave Miami Springs	12/27/72	
John Coello Date / Fecha: 1/20/23	1139 Heron Ave Miami Springs Fl	12/05/75	
Ana Quiñones Coello Date / Fecha: 1/20/23	1139 Heron Ave. Miami Springs, FL	03/19/76	
Date / Fecha: 1/26/23			
Juan Jose Rodriguez Date / Fecha: 1-26/23	1390 Lenape Dr. Miami Spr. FL	12/04/46	
Jorge L. Calil Date / Fecha: 1-27-23	1015 Dove Ave Miami Springs FL 33166	1/16/73	
Kimberly Calil Date / Fecha: 1/27/23	1015 Dove Ave Miami Springs FL	5/19/74	
Lucy A Diaz Date / Fecha: 1/28/23	117 Hammond Dr. Miami Springs FL	12/13/49	
[redacted] Date / Fecha: [redacted]	[redacted] Miami Springs, FL	[redacted]	

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 8 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor:	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:
Notary Public: Notario Público:	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte	My commission expires: Mi comisión expira: 11/25/26

Notary Public State of Florida
Sandra Duarte
My Commission HH 334861
Expires 11/25/2026

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:50 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS

2023 JAN 30 AM 10:52

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
VINCENT Medel 01/25/2023 Date / Fecha: 1/25/2023	MIAMI SPRINGS 330 MORNINGSID DR	07/13/1948	
LINDA Gilano 1/25/23 Date / Fecha: 1/25/23	45 Crescent Dr #3 Miami Springs,	1-5-49	
RANDALL Mabee 1/25/23 Date / Fecha: 1/25/23	45 Crescent Dr #3 Miami Springs	10/31/45	
Date / Fecha:			
Date / Fecha:			
Date / Fecha:			
Date / Fecha:			
Date / Fecha:			
Date / Fecha:			

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 3 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ **Firma del Distribuidor:** Jaquelyn M. Bravo	**Address:** **Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:	
Notary Public: Notario Público:	Notary Public State of Florida Sandra Duarte My Commission HH 334861 Expires 11/25/2026	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte		My commission expires: Mi comisión expira: 11/25/26

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:49 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS

2023 JAN 30 AM 10: 52

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate:
NOSOTROS, los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:

Name of Candidate/Nombre del Candidato: Jacky Bravo

who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA

for the office of: / para el cargo de: City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Barbara Cunningham Date / Fecha: 1/24/2022	137 NAVARRE DRI Miami Springs 33166	12/26/1971	
Gisel De Renzo Date / Fecha: 1/24/2023	65 Palmetto Drive Miami Springs, Fl 33166	5/20/74	
Steven De Renzo Date / Fecha: 1/24/2023	65 Palmetto Drive Miami Springs, Fl 33166	8/28/69	
Irelys Gomez 1/24/2023 Date / Fecha: 1/24/2023	1216 Meadow Lark Ave Miami Springs, FL 33166	10/10/77	
CARLOS SOBRINO Date / Fecha: 1/24/23	1182 MEADOWLARK AVE MIAMI SPGS. FL 33166	6/29/46	
ISABEL SOBRINO Date / Fecha: 1/24/23	1182 MEADOWLARK AVE MIAMI SPGS FL 33166	11/14/48	
Date / Fecha:			

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 6 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.

El que suscribe es el distribuidor de esta hoja, que contiene _____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.

Signature of Circulator/ Firma del Distribuidor: Jaqueline M. Bravo

Address: Dirección: 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: / A quien conozco personalmente: ✓

or Provided Identification: / o Quien Produjo Identificación: _____

Notary Public: / Notario Público:

Print/Letra de Molde: Sandra Duarte

Notary Public State of Florida Sandra Duarte My Commission HH 334861 Expires 11/25/2026

Date: / Fecha: 1/30/23

My commission expires: / Mi comisión expira: 11/25/26

RECEIVED BY CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:48 By: Sandra Duarte

RECEIVED JAN 30 23 CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS

2023 JAN 30 AM 10: 52

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Michael Gavin Date / Fecha: 1/14/23	223 North Royal Poinciana	8/3/61	Michael Gavin
Michael Pellini Date / Fecha: 1/20/23	1100 Falcon Ave Miami Springs	10/2/62	
Diane Pellini Date / Fecha: 1/20/23	1100 Falcon Avenue Miami Springs	7/5/71	Diane Pellini
Jorge Cal Date / Fecha: 1/23/23	1015 Oak Ave Miami Springs, FL 33166	5/16/73	
Ana Paula Ibarra Date / Fecha: 1.23.23	700 Plover Ave Miami Springs, FL 33166	04.16.76	
Judith A. Hernandez Date / Fecha: 1-23-23	1131 Red Bird Ave Miami Springs FL 33166	05/10/1942	Judith A. Hernandez
Charles Leonard Date / Fecha: 1-23-2023	1 Condon Dr Miami Springs FL 33166	10/2/58	
Arlene Suarez Date / Fecha: 1/24/23	684 Morningside Dr Miami Springs, FL 33166	3/23/84	
Alex Suarez Date / Fecha: 1/24/23	684 Morningside Dr	Nov. 5, 1977 11/5/77	
RAQUEL MACERO Date / Fecha: 1/24/23	970 WREN AVE	09/01/67	

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 10 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor: Jaqueline M. Bravo	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:
Notary Public: Notario Público:	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte	My commission expires: Mi comisión expira: 11/25/26

Notary Public State of Florida
Sandra Duarte
My Commission HH 334884
Expires 11/25/2026

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:48 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS

2023 JAN 30 AM 10:52

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Miriam Cabrera Date / Fecha: 1/24/23	540 Hunting Lodge Dr.	12/22/58	Miriam Cabrera
Evelio Cabrera Date / Fecha: 1/24/23	540 Hunting Lodge Dr	11/23/59	
Robert Castillo Date / Fecha: 1/24/23	1256 IBIS AV	7/27/83	
Lydia Peraza Date / Fecha: 1/24/23	84 Glendale Dr.	01/29/74	Lydia A. Peraza
Alejandro Peraza Date / Fecha: 1/24/23	84 Glendale Dr.	12/06/69	
Hector Silva Date / Fecha: 1/24/2023	100 Pocatello St	9/13/45	
Victoria Sopena Date / Fecha: 1-24-2023	100 Pocatello street	5/6/81	
RAMIRO MARRERO JR Date / Fecha: 01/24/23	970 ORSINI AVE	03/04/68	
Michael Trujillo Date / Fecha: 1/24/23	671 Plover Ave	09/13/79	
Nicole Beltran Date / Fecha: 1/24/23	1270 Redbird Ave	12/19/75	

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 10 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor: Jaqueline A. Bruno	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:
Notary Public: Notario Público:	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte	My commission expires: Mi comisión expira: 11/25/26

Notary Public State of Florida
Sandra Duarte
My Commission HH 334861
Expires 11/25/2026

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:47 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS

2023 JAN 30 AM 10: 52

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate:
NOSOTROS, los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:

Name of Candidate/Nombre del Candidato: Jacky Bravo

who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA

for the office of: / para el cargo de: City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Teresa Jcoren Date / Fecha: 1/24/23	125 Navajo Street Miami Springs FL 33166	8/23/83	
Marie Gonzalez-Estrada Date / Fecha: 1/24/22	249 Patricia Dr. Miami Springs, FL 33166	8/10/79	
Lanette Torres Date / Fecha: 1/24/23	1268 15th Avenue Miami Springs FL 33166	12/29/79	
Pierre Amegavie Date / Fecha: 1-24-23	1268 15th Avenue Miami Springs FL 33166	2/14/86	
Yalenis Gonzalez Date / Fecha: 1/24/2023	731 South Avenue Miami Springs FL 33166	06/26/83	
Rodrigo Gonzalez Date / Fecha: 1/24/2023	731 South Avenue Miami Springs FL 33166	8/10/1982	
Lopez, Claudia Date / Fecha: 1-26-23	230 Hunting Lodge Dr. Miami Springs, FL 33166	6-17-78	
Justo, Albert Date / Fecha: 1/26/23	230 Hunting Lodge Dr Miami Springs, FL 33166	12/19/74	
Lopez, Ximena Date / Fecha: 1/26/23	670 Plaza Ave Miami Spring, FL 33166	10-19-91	
Date / Fecha:			

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 9 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.

El que suscribe es el distribuidor de esta hoja, que contiene _____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.

Signature of Circulator/ Firma del Distribuidor: Jaquelyn M. Bravo

Address: Dirección: 1161 Dove Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: / A quien conozco personalmente: ✓

or Provided Identification: / o Quien Produjo Identificación: _____

Notary Public: / Notario Público:

Notary Public State of Florida Sandra Duarte My Commission HH 334861 Expires 11/25/2026

Date: / Fecha: 1/30/23

Print/Letra de Molde: Sandra Duarte

My commission expires: / Mi comisión expira: 11/25/26

RECEIVED BY CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:46 By: Sandra Duarte

RECEIVED JAN 30 23 CITY CLERK'S OFFICE

2023 JAN 30 AM 10: 52

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Maylin Lapido-Rodriguez Date / Fecha: 1/20/23	1170 Ibis Avenue Miami Springs, FL 33166	06-27-77	M. Lapido-Rdgz
Manuel Rodriguez Date / Fecha: 1/20/23	1170 Ibis Avenue Miami Springs, FL 33166	01-20-75	
CLARA G. LAPIDO 1/20/23 Date / Fecha: 1/20/23	201 Florida Ave Miami Springs FL 33166	12/12/1950	Clara G. Lapido
ARMANDO LAPIDO 1/20/23 Date / Fecha: 1/20/23	201 Florida Ave Miami Springs FL 33166	8/27/49	Armando Lapido
JULIO BONET 01-20-23 Date / Fecha:	1150 Partridge Ave Miami Springs FL 33166	05/17/66	Julio Bonet
Gregory Gates 01-20-23 Date / Fecha:	326 Falcon Ave Miami Springs FL, 33166	30 Apr 1964	
Chase Bonet 01-20-23 Date / Fecha:	1150 Partridge Ave Miami Springs FL 33166	03/04/04	Chase Bonet
Brent Gates Date / Fecha: 1-24-2023	326 Falcon Ave. Miami Springs, FL 33166	06/13/1998	
Jarrell Perez Date / Fecha: 1/24/23	750 Shadow Way Miami Springs, FL 33166	06/11/1976	
Mark Gonzalez Date / Fecha: 1/24/23	750 Shadow Way Miami Springs, FL 33166	03/12/1968	

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 10 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor: Jaqueline H. Bravo	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: Lo Quien Produjo Identificacion:	
Notary Public: Notario Público:	Notary Public State of Florida Sandra Duarte My Commission HH 334861 Expires 11/25/2026	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte		My commission expires: Mi comisión expira: 11/25/26

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:45 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS 2023 JAN 30 AM 10: 51

2023 JAN 30 AM 10: 51

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Diana Bello 1/13/23 Date / Fecha:	910 Quail Ave	6/15/60	Diana Bello
Raul Bello 1/13/23 Date / Fecha:	910 Quail Ave	10/4/81	[illegible]
Kristina Rodriguez 1.13.23 Date / Fecha:	910 Quail Ave.	12.23.83	[illegible]
Jose Rodriguez 1-13-23 Date / Fecha:	910 QUAIL AVE	10-9-57	[illegible]
Ana Gonzalez 1-14-23 Date / Fecha:	900 Quail Ave	8.14.71	[illegible]
Walter Gonzalez 1-14-23 Date / Fecha:	900 Quail Ave	[illegible]	[illegible]
Alejandro Pacheco 1-19-23 Date / Fecha:	1001 Ibis Ave	5-14-66	[illegible]
Janice Pacheco 1-19-23 Date / Fecha:	1001 Ibis Ave.	10-25-67	[illegible]
Yannick Kemmache 1-24-23 Date / Fecha:	1450 Indian Dr.	10/16/91	[illegible]
Martha Kelley 1-24-23 Date / Fecha:	1 Deer Run	4/20/45	Martha Kelley

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 10 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor: Jacqueline Bravo	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:	
Notary Public: Notario Público:	Notary Public State of Florida Sandra Duarte My Commission HH 334861 Expires 11/25/2026	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte		My commission expires: Mi comisión expira: 11/25/26

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:44 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS

2023 JAN 30 AM 10:51

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council. Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Diana Lura Date / Fecha: 1/13/23	330 Azure Way M. Springs FL 33166	10/22/81	
Michelle Ligua Date / Fecha: 1/18/23	24 Whitethorn Dr. Miami Springs, Fl. 33166	9/21/82	
Omar Ligua Date / Fecha: 1/18/23	24 Whitethorn Dr. Miami Springs FL 33166	8/21/82	
KARMEN PADILLA Date / Fecha: 1-18-23	1685 Westward Drive Miami Springs, FL 33166	5-20-80	
Maria Comas Date / Fecha: 1-19-23	80 Redbird Ave Miami Springs, FL 33166	9/03/51	
Manuel Santiago Date / Fecha: 1-19-23	1080 Redbird Ave Miami Springs FL 33166	2/7/53	
Nestor Suarez Date / Fecha: 1-20-23	550 Green Ave Mia Spgs, FL	8-27-74	
Diana Suarez Date / Fecha: 1-20-23	550 Green Ave Mia Spgs, FL	8-7-73	
JOSE A. FARO Date / Fecha: 1/25/23	34 S. Royal Poinciana Blvd.	4-20-29	
Francisco Bravo Date / Fecha: 1/25/23	1161 Ibis Ave.	11/26/77	

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 10 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor: Jacquelyn M. Bravo	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:	
Notary Public: Notario Público:	Notary Public State of Florida Sandra Duarte My Commission HH 334861 Expires 11/25/2026	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte		My commission expires: Mi comisión expira: 11/25/26

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:43 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

2023 JAN 30 AM 10: 51

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
Aurelia E. Martinez Date / Fecha: ~~1/12/23~~ 1/12/23	967 Hunting Lodge Dr Miami Springs, FL 33166	5/3/65	Aurelia E Martinez
Ricardo R. Martinez Date / Fecha: 1-12-23	967 Hunting Lodge Drive Miami Springs FL 33166	12-02-66	[illegible]
Gabriela Martinez Date / Fecha: 1/13/23	967 Hunting Lodge Dr.	02/26/00	[illegible]
Ricardo R. Martinez Date / Fecha: 1/13/23	967 Hunting Lodge Drive	12/13/94	[illegible]
Efrain Jorge SANTIN Date / Fecha: 1/13/23	1249 HERON AVE MIAMI SPRINGS, FL	09/24/65	[illegible]
JOSE S. MARTINEZ Date / Fecha: 01-15-23	1151 HERON AVE MS FL 33166	10/28/39	[illegible]
[illegible] Date / Fecha: 1/15/23	1151 Heron Ave M.Spring FL 33166	01/28/42	[illegible]
Ilia Molina Date / Fecha: 1/19/23	31 Hunting Lodge Dr Mia Spr 33166	12/27/81	[illegible]
Juan Molina Date / Fecha: 1/19/23	31 Hunting Lodge Dr Mia Spr. 33166	8/27/78	[illegible]
ILIA PEREZ Date / Fecha: 1/19/23	1161 Falcon Ave	8/30/54	[illegible]

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 10 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor: Jacqueline A. Bravo	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:	
Notary Public: Notario Público:	Notary Public State of Florida Sandra Duarte My Commission HH 334861 Expires 11/25/2026	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte		My commission expires: Mi comisión expira: 11/25/26

RECEIVED BY
CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:43 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

CITY OF MIAMI SPRINGS

2023 JAN 30 AM 10:53

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 11, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACION DE UN CANDIDATO

WE, the undersigned electors of Miami Springs, Florida do hereby nominate: **NOSOTROS,** los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jacky Bravo
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council, Seat 2

PRINT NAME INSCRIBA SU NOMBRE EN LETRA DE MOLDE	RESIDENCE ADDRESS DOMICILIO	DATE OF BIRTH OR REGISTRATION # FECHA DE NACIMIENTO O NUMERO DE INSCRIPCION	SIGNATURE FIRMA
1/28/23 Fernando Rodriguez Date / Fecha:	1400 Lenape Drive Miami Springs FL	7/29/82	
Maria Elizabeth Calderon 1/28/23 Date / Fecha:	1400 LENAPE DR. MIAMI SPRINGS, FL	09/10/61	
1/28/23 Patricia Alcaine Date / Fecha:	998 Ibis Avenue Miami Springs, FL	09/04/77	
1/28/23 Elizabeth Diaz Perez Date / Fecha:	1265 Bluebird Ave - M. Springs Fl. 33166	11/17/77	
1/28/23 Beatriz C. Lecusay Diaz Date / Fecha:	1101 Redbird Ave. Miami Spgs.	8/17/65	
1-28-23 Jan Caldell Date / Fecha:	1201 oriole Ave	2/26/38	
1/28/23 Luis Perez Date / Fecha:	1265 BLUEBIRD AVE M. SPRINGS FL	10/5/71	
1/28/23 Jose M. Diaz Date / Fecha:	1101 Redbird Ave M. Springs Fl. 33166	12/11/64	
1/28/23 Maria Lopez Date / Fecha:	101 Pinecrest Drive M. Springs FL 33166	3/3/61	Maria Lopez
1/28/23 Date / Fecha:	1110 Standing Ave Sprd.	8/25/45	

Estela Sanchez

STATEMENT OF CIRCULATOR/DECLARACION DEL DISTRIBUIDOR

The undersigned is the circulator of the foregoing paper containing 10 signatures. Each signature appended thereto was made in my presence and is the signature of the person whose name it purports to be.	El que suscribe es el distribuidor de esta hoja, que contiene_____ firmas. Cada firma se hizo en mi presencia y es la firma de la persona a la que corresponde.
Signature of Circulator/ Firma del Distribuidor:	**Address: Dirección:** 1161 Ibis Avenue Miami Springs, FL 33166

STATEMENT OF NOTARY PUBLIC/CERTIFICACION DEL NOTARIO PUBLICO

Personally known to me: A quien conozco personalmente: ✓	or Provided Identification: o Quien Produjo Identificación:
Notary Public: Notario Público:	Date: Fecha: 1/30/23
Print/Letra de Molde: Sandra Duarte	My commission expires: Mi comisión expira: 11/25/26

Notary Public State of Florida
Sandra Duarte
My Commission HH 334364
Expires 11/25/2026

RECEIVED BY CITY CLERK'S OFFICE: Date: 1/30/23 Time: 10:50 By: Sandra Duarte

RECEIVED
JAN 30 23
CITY CLERK'S OFFICE

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2022

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

CITY OF MIAMI SPRINGS
2023 JAN 24 PM 12:59

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME : Bravo, Jaquelyn

MAILING ADDRESS : 1161 Ibis Avenue

CITY : Miami Springs, FL ZIP : 33166 COUNTY : Miami-Dade

NAME OF AGENCY : Miami Springs City Mayor + Council

NAME OF OFFICE OR POSITION HELD OR SOUGHT : Councilwoman

CHECK ONLY IF ☑ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

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

DISCLOSURE PERIOD:
THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2022.

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
Bravo International Real Estate, LLC	1161 Ibis Avenue Miami Springs, FL 33166	Real Estate Services

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
None			

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

None

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.

(Continued on reverse side)

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
None	CITY OF MIAMI SPRINGS
	2023 JAN 24 PM 12:59

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
None	

PART F — INTERESTS IN SPECIFIED BUSINESSES **[Ownership or positions in certain types of businesses - See instructions]**
(If you have nothing to report, write "none" or "n/a")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	N/A	N/A
ADDRESS OF BUSINESS ENTITY	N/A	N/A
PRINCIPAL BUSINESS ACTIVITY	N/A	N/A
POSITION HELD WITH ENTITY	N/A	N/A
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N/A	N/A
NATURE OF MY OWNERSHIP INTEREST	N/A	N/A

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:

Jacqueline M. Brown

Date Signed:

1/24/2023

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 CEForm1@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, 2022.

CITY OF MIAMI SPRINGS

2023 JAN 24 PM 12:59

AFFIDAVIT OF RESIDENCY

I, Jaquelyn Bravo, hereby file this Affidavit of Residency this 24 day of January, 2023. I reside at 116 Ibis Avenue, Miami Springs, Florida, do hereby swear (or affirm) that I have resided in the City of Miami Springs for a minimum of six (6) months continuously, prior to the day of qualifying as a candidate for the office of councilmember or mayor, as required by Miami Springs Charter §3.04 (1) for the General Election to be held on April 4, 2023.

Jaquelyn M. Bravo
Signature of Affiant

305. 206. 1922
Telephone

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me this 24th day of Jan 2023, by Jaquelyn Bravo.
(Name of person making statement)

Erika Gonzalez
Signature of Notary Public, State of Florida

ERIKA GONZALEZ-SANTAMARIA
MY COMMISSION # GG 361880
EXPIRES: December 1, 2023
Bonded Thru Notary Public Underwriters

Erika Gonzalez Santamaria
(Notary's name typed, printed or stamped)

Personally Known ✓ or Produced Identification _____
Type of Identification Produced: _____

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

CITY OF MIAMI SPRINGS
2023 JAN 10 PM 12:28

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)
Jaquelyn Michel Bravo

3. Address (include post office box or street, city, state, zip code)
1161 Ibis Avenue
Miami Springs, FL 33166

4. Telephone
(305) 206-1922

5. E-mail address
jaquelynms@gmail.com

6. **Office sought** (include district, circuit, group number)
Group 2 - City of Miami Springs

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
Jacky Bravo

11. Mailing Address
1161 Ibis Avenue

12. Telephone
(305) 206-1922

13. City
Miami Springs

14. County
Miami-Dade

15. State
FL

16. Zip Code
33166

17. E-mail address
jaquelynms@gmail.com

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

19. Name of Bank
Wells fargo

20. Address
1700 NW 87 Avenue

21. City
Doral

22. County
Miami Dade

23. State
FL

24. Zip Code
33172

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
1/10/2023

26. Signature of Candidate
X Jaquelyn M Bravo

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

I, Jaquelyn M. Bravo, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☑ Campaign Treasurer ☐ Deputy Treasurer.

1/10/2023
Date

X Jaquelyn M Bravo
Signature of Campaign Treasurer or Deputy Treasurer

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

CITY OF MIAMI SPRINGS
2022 DEC 15 PM 12: 17

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)
Jaquelyn Michel Bravo

3. Address (include post office box or street, city, state, zip code)
1161 Ibis Avenue
Miami Springs, FL 33166

4. Telephone
(305) 206-1922

5. E-mail address
Jaquelynms@gmail.com

6. **Office sought** (include district, circuit, group number)
District #6 / Group 2

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
Jacky Bravo

11. Mailing Address
1161 Ibis Avenue

12. Telephone
(305) 206-1922

13. City	14. County	15. State	16. Zip Code	17. E-mail address
Miami Springs	Miami-Dade	FL	33166	Jaquelynms@gmail.com

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

19. Name of Bank
Truist Bank

20. Address
63 Westward Drive

21. City	22. County	23. State	24. Zip Code
Miami Springs	Miami-Dade	Florida	33166

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
12/15/2022

26. Signature of Candidate
X Jaquelyn M. Bravo

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

I, Jaquelyn M. Bravo, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer. ☐ Deputy Treasurer.

Jaquelyn M. Bravo X 12/15/2022
Date Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

CITY OF MIAMI SPRINGS

2022 DEC 15 PM 12: 17

I, Jaquelyn M. Bravo,

candidate for the office of Group II Council;

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

X Jaquelyn M. Bravo
Signature of Candidate

12/15/22
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).