Erika Gonzalez-Santamaria

From: Erika Gonzalez-Santamaria
Sent: Thursday, February 23, 2023 9:31 AM
To: 'grahamje14@gmail.com'
Subject: Ballot Number for April 4, 2023

Good morning,

Your Ballot Number for the election is #54.

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 21st, 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 Jennifer Graham a candidate for City Council, Group II for the City of Miami Springs. A total of 76 petitions were reviewed for verification; of which 66 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 **66** signatures submitted by **Jennifer Graham** 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 21st DAY OF
FEBRUARY, 2023

Christina White
Supervisor of Elections

RECEIVED

FEB 17 23

CITY CLERK'S OFFICE

Jennifer Graham
Campaign Account
Group 11

63-9138/2631

98

DATE 02/16/23

PAY TO THE ORDER OF City of Miami Springs $ 85—

Eighty-five dollars XX/100 DOLLARS

Security Features Included. Details on Back.

TRUIST

MEMO Campaign Qpll Fee

⑈263191387⑆11000260582 77⑈00098

SPECIALTY BLUE

© DELUXE WALLET OR DUPLICATE

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

Oper: MIASMBM Type: OC Drawer: 1
Date: 2/17/23 01 Receipt no: 744

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

FILING FEE
JENNIFER GRAHAM

Tender detail		
CK CHECK	98	$85.00
Total tendered		$85.00
Total payment		$85.00

Trans date: 2/17/23 Time: 15:55:30

MIAMI-DADE COUNTY

OFFICIAL RECEIPT

MIAMI-DADE COUNTY–FLORIDA

No. 8053560

RECEIVED FROM City of Hom Springs

DATE 2 / 17 / 23 (MONTH / DAY / YEAR)

ADDRESS 201 Westward Drive (STREET ADDRESS)

Miami Springs (CITY) FL (STATE) 33166. (ZIP)

CASH $ 7 . 60

CHECKS $.

TOTAL $ 7 . 60

AMOUNT OF: Seven 00/XX DOLLARS, AND 60/XX CENTS

FOR PAYMENT OF: Pedros Vaccination - Tempe Marina - Grp II.

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

DEPT.: Vital Services BY: [illegible]

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBOBJECT	AMOUNT

107.01-1 6/04

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: Jennifer E Graham
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council GP 11

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

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
Eric Santin Date / Fecha: 2/16/23	1249 Heron Ave Mia Springs	6/8/66	
Staci Landwehr Date / Fecha: 2/20/23	541 Lenape Dr. Miami Springs	2/16/73	Staci J. Landwehr
~~1/29/23~~ Date / Fecha:	~~Miami Springs~~	~~2/16/73~~	~~Staci J. Landwehr~~
Anna Alves Date / Fecha: 1/29/2023	1016 Bass Point Rd. M.S.	7/23/1970	
~~1/29/2023~~ Date / Fecha:	—	—	—
DANIEL GOMEZ Date / Fecha: 1/29/2023	540 ORIOLE AVE MIAMI SPRINGS, FL	3/16/1981	
Melissa Noya Date / Fecha: 1/29/2023	710 Oriole Ave. Miami Springs, FL 33166	8/8/1990	
BETTY MELETIS Date / Fecha: 2-16-23	1010 Oriole Ave M.S. 33166	2-26-56	
Helen Dunstall Date / Fecha: 2-16-23	100 Navajo St. M.S. 33166	12-29-41	Helen Dunstall
Anne Di Bernardo Date / Fecha: 2-16-23	270 S. Melrose Dr Miami Springs, FL	09-25-1962	

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:** 75 Deer Run 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: 2/17/2023
Print/Letra de Molde: Carmen Maria Gonzalez Santamaria	My commission expires: Mi comision expira:

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

RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:30 am By: _____

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

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

WE, the undersigned electors of Miami Springs, Florida, hereby nominate: **NOSOTROS**, los electores de Miami Springs, Florida que suscriben, por la presente proclamamos a:	Name of Candidate/Nombre del Candidato: Jennifer E Graham
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council GP 11

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
Thomas Curtis Date / Fecha: 2/16/23	1229 Westward	11/1/47	
Kathleen Fleischman Date / Fecha: 2/16/2023	810 Pinecrest Dr 33166 Miami Springs	3/14/1950	
MITZI FRICK Date / Fecha: 2/16/23	71 CARLISLE DRIVE MIAMI SPRINGS, FL 33166	7/1/53	
SUSAN P. SMITH Date / Fecha: 2-16-2023	560 Leon Way	03/13/49	Susan P. Smith
NORMAN FLEISCHMAN Date / Fecha: 2-16-2023	810 PINECREST DR MIAMI SPGS 33166	12/29/1945	
KAREN [illegible] Date / Fecha: 2/16/23	1280 STARLING ACE MIAMI SPRINGS	11/30/53	
Karen Hall Date / Fecha: 2/16/23	454 Hunting Lodge Miami Springs, FL	02/22/58	
DAVID L. BARNHART Date / Fecha: 2/16/23	75 Deer Run Miami Springs FL 33166	6/1/65	
HERMINIO GARCIA Date / Fecha: 2/16/2023	114 Deleon DR. M. SPRINGS-33166	3/29/47	
Nette Garcia-Estrada Date / Fecha: 02-16-2023	114 DE LEON DRIVE MIAMI SPRINGS 33166	03-13-1961	

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:** 75 Deer Run 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: 2/16/2023
Print/Letra de Molde: Erika Gonzalez Santamaria	My commission Expires: Mi comisión expira:

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

RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 1:30 pm By:

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
CANDIDATE NOMINATION PETITION
PETICION PARA LA PROCLAMACIÓN 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: Jennifer E Graham
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: / para el cargo de:	City Council GP11

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

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
Erik Landwehr Date / Fecha: 2/16/23	541 Lenape Drive Miami Springs 33166	08/02/1972	
Tyler Reed Date / Fecha: 2/16/23	241 Rosedale Drive Miami Springs FL, 33166	06/10/1992	
Mary Reed Date / Fecha: 2/16/23	241 Rosedale Dr Miami Springs, FL 33166	05/27/1959	Mary Reed
Jacqueline Rosenfeld Date / Fecha: 2/16/23	450 Payne Drive Miami Springs FL 33166	2/27/78	
RALPH WAKEFIELD Date / Fecha: 2/16/23	255 SPRINGS AV 33166	9/25/46	
Nancy Jones Date / Fecha: 2/16/2023	255 Springs Ave. Miami Springs FL 33166	3/15/1956	Nancy Jones
Carlos Puentes Date / Fecha: 02/16/23	380 Pine Ct. Miami Springs, 33166	08/09/66	
RHONDA CALVET Date / Fecha: 2-16-23	101 S. Drive Miami Spring FL	08/3/53	
Kenneth Amendola Date / Fecha: 2/16/23	454 Hunting Lodge Dr Miami Springs 33166	09/12/51	
[illegible] Date / Fecha: 2/16/23	1450 Hidalgo Miami Springs	04/20/62	

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:** 75 Deer Run 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: 2/17/2023
Print/Letra de Molde: Erika Gonzalez Santamaria	My commission expires: / Mi comisión expira:

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

RECEIVED BY CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:30 am By:

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

CITY OF MIAMI SPRINGS
2023 FEB 7 AM 11:29

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: Jennifer E Graham
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: / para el cargo de:	City Council GP11

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
ANA CARVAJAL Date / Fecha: 02-16-2023	1320 Henape DR M.SPRINGS	9/26/52	Ana Carvajal
Monica Vigna Date / Fecha: 2/16/23	1091 Orole Dr M. SPRINGS	9/11/73	Monica Vigna
Manuel Garcia Estrada Date / Fecha:		1/4/75	
BARBARA DAVIS Date / Fecha: 2-16-2023	210 LAUREL WAY MIAMI SPRINGS 33166	03-21-42	Barbara Davis
Eddie Lopez Date / Fecha: 2-16-2023	1200 Heron Avenue Miami Springs 33166	07.18.1960	
Angus Laney Date / Fecha: 2/16/2023	671 Falcon Avenue Miami Springs	6/3/1961	
Melinda McNichols Date / Fecha: 2-16-2023	1471 Hammond Dr Miami Springs	2/24/1954	M. McNichols
Rosanna Rosado Date / Fecha: 2/16/23	1200 Heron Ave. Miami Springs FL 33166	2/12/23	Ros
Vincent Vigna Date / Fecha: 02-16-2023	1091 ORole Ave. MIAMI SPRINGS 33166	03/03/74	
Marie C. Garcia-Estrada Date / Fecha: 2/16/23	249 Palmetto Dr. MIAMI SPRINGS, FL 33166	8/10/79	

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:** 75 Deer Run 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: 2/17/2023
Print/Letra de Molde: Erika Gonzalez Santamaria	My commission expires: / Mi comisión expira:

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

RECEIVED BY CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:30am By:

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: Jennifer E Graham
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: / para el cargo de:	City Council GP 11

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

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
Jennifer E Graham Date / Fecha: 2-16-23	75 Deer Run Miami Springs FL 33166	12-1-67	
Kim Calil Date / Fecha: 2/16/23	1015 Dove Ave Miami Springs FL 33166	05/19/74	Kimberly Calil
Sofia Calil Menzer Date / Fecha: 2/16/22	790 Morningside Dr. Miami Springs, FL 33166	05/11/2004	
Samuel Chesser Date / Fecha: 2/16/23	531 Oriole Ave Miami Springs FL 33166	01/20/68	
DEE DERINGER PIQUETTE Date / Fecha: 2/16/23	153 Corydon MSPGS FL 33166	02/12/1952	Dee Deringer Piquette
Jorge Calil Date / Fecha: 2/16/2023	1015 Dove Ave Miami Springs FL 33166	5/16/73	
David Rosenfeld Date / Fecha: 02/28/23	450 Payne Drive Miami Springs FL 33166	8/20/78	
Lily Fuentes Date / Fecha: 2/16/23	380 Pine St. Miami Springs, FL 33166	09/13/71	Lily Fuentes
Antonia Henrik Date / Fecha: 2/16/23	510 Oriole Ave Miami Springs, FL 33166	12/18/80	
Daniel Gomez Date / Fecha: 2/16/23	540 Oriole Ave Miami Springs, FL 33166	12/18/80	Daniel Gomez

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:** 75 Deer Run 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: 2/17/2023
Print/Letra de Molde: Erika Gonzalez Santamaria	My commission expires: / Mi comisión expira:

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

RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:30am By:

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: Jennifer E. Graham
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: / para el cargo de:	City Council GP11

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

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
ROBERT A. BEST Date / Fecha: 2/16/23	1216 IBIS AVE MIAMI SPRINGS, FL.	12-31-52	
KRISTIAN N. BEST Date / Fecha: 2-16-'23	1216 IBIS AVE MIAMI SPRINGS	5-30-90	
Emma Best Date / Fecha: 2-16-23	1216 IBIS AVE Miami Springs	9-12-91	
HENRY WEBB Date / Fecha: 2-16-23	416 LAUREL AVE MIAMI SP., FL	9-12-46	
RALPH KNAPP Date / Fecha: 2-16-2023	MIA SPR FL 33166 Deadland Ave	9-9-65	
Yesenia Del Busto Date / Fecha: 2-16-23	200 Azure Way 209 33166	1-15-75	
Gabriel Alcazar Date / Fecha: 2-16-23	200 Azure Way 209 33166	12-31-72	
Brenda Hernández Date / Fecha: 2-16-23	212 Cherokee ST M. Springs FL 33166	9-18-73	
Lazaro Quintana Date / Fecha: 2-16-23	212 Cherokee ST M. Springs FL 33166	09-27-68	
STEVEN ALBRITTON Date / Fecha: 2/16/23	9 N MELROSE DR MIAMI SPRINGS FL 33166	12/18/52	

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:** 75 Deer Run 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: 2/17/2023
Print/Letra de Molde: Erika Gonzalez Santamaria	My commission expires: / Mi comision expira:

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

RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:20am By:

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: CITY OF MIAMI SPRINGS Jennifer F Graham 2023 FEB 17 AM 11:29
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council GP 11

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
Kayla Fejoo Date / Fecha: 2/16/23	1 Ludlam Drive. Miami Springs, FL 33166	07/14/89	Kayla Fejoo
Sherry Fejoo Date / Fecha: 2/16/23	1 Ludlam Dr. Miami Spgs FL 33166	8/18/66	
Junior Diaz Date / Fecha: 2/16/23	275 Deer Run Miami Springs FL	12/12/85	
Tony Fejoo Date / Fecha: 2/16/23	1 Ludlam Drive Miami Springs FL 33166	11/26/63	
Detlef Sauer Date / Fecha: Feb 16, 2023	100 Shadow Way Miami Springs FL 33166	06 29 1949	Detlef P Sauer
Yolanda Sauer Date / Fecha: Feb 16/2023	140 Shadow Way Miami Springs Fl 33166	8.20.63	
Date / Fecha:			
Date / Fecha:			
Date / Fecha:			
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:	**Address: Dirección:** 75 Deer Run 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: 2/17/2023
Print/Letra de Molde: Erika Gonzalez-Santamaria	My commission expires: Mi comision expira:

ERIKA GONZALEZ-SANTAMARIA
MY COMMISSION # GG 361880
EXPIRES: December 1, 2023
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RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:30am By:

MIAMI SPRINGS GENERAL ELECTION OF TUESDAY, APRIL 4, 2023
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who last registered at: / cuya dirección de su última registración es:	MIAMI SPRINGS, FLORIDA
for the office of: para el cargo de:	City Council Grp II

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

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
Date / Fecha: 2-16-23	Miami Springs 1100 Monticello Ave	9-8-56	
Victor Vazquez Date / Fecha: 2/16/23	2 De Leon Drive Miami Springs, FL 33166	7-11-52	
Date / Fecha:			
John Drewrey Date / Fecha: 2-17-23	1202 Quail Miami Springs FL	2-2-41	
Tom Hotchkiss Date / Fecha: 2-17-23	151 Hibiscus Dr Miami Springs 33166	6-19-63	
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 4 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:** 75 Dearborn 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: 2/17/2023
Print/Letra de Molde: Erika Gonzalez Santamaria	My commission expires: Mi comisión expira:

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

RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:30am By:

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	Name of Candidate/Nombre del Candidato: E Graham
who last registered at: / cuya dirección de su última registración es: MIAMI SPRINGS, FLORIDA	
for the office of: para el cargo de:	City Council GP11

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

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
Rosemarie Mangiaracina Date / Fecha: 2-18-22	270 S Melrose Miami Springs FL 33166	6/10/40	Rosemarie Mangiaracina
RAFAEL MARTINEZ Date / Fecha: 2/16/23	95 Deer Run Miami Spgs, FL 33166	1/12/49	
CARMEN LILI MARTINEZ Date / Fecha: 2/16/2023	95 Deer Run Miami Springs, FL 33166	12/9/1954	Carmen Lili Martinez
Jurell Murguido Date / Fecha: 2/16/23	789 Pinecrest Dr. Miami Springs, FL 33166	11/11/85	
Ariadna Quintana Date / Fecha: 2/16/23	951 Nightingale Ave. Miami Springs, FL 33166	10/20/95	
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 5 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:** 95 Deer Run 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: 2/17/2023
Print/Letra de Molde: Erika Gonzalez Santamaria	My commission expires: Mi Comisión expira:

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

RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 1130am By:

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: Jennifer E. Graham
who last registered at: / cuya dirección de su última registración es:	MIAMI SPRINGS, FLORIDA
for the office of: para el cargo de:	City Council GP 11

CITY OF MIAMI SPRINGS
2023 FEB 17 AM 11:29

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
Valerie McCarty Date / Fecha: ~~365-46~~ 2/16/23	424 Hunting Lodge Dr. Miami Springs Fl 33166	05-13-54	Valerie L. McCarty
John A. McCarty Date / Fecha: 2/16/2023	424 Hunting Lodge Dr. Miami Springs FL 33166	05/22/1953	[illegible]
Alex McCarty Date / Fecha: 2/16/2023	424 Hunting Lodge Dr. Miami Springs, FL, 33166	11-09-1992	Alex McCarty
William McCarty Date / Fecha: 2/16/23	424 Hunting Lodge Dr Miami Spings FL, 33166	02/27/1988	[illegible]
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 4 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: [illegible]	**Address: Dirección:** 75 Deer Run 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: [illegible]	Date: Fecha: 2/17/2023
Print/Letra de Molde: Erika González Santamaría	My commission expires: Mi comisión expira:

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

RECEIVED BY
CITY CLERK'S OFFICE: Date: 2/17/23 Time: 11:30am By: [illegible]

CITY OF MIAMI SPRINGS

2023 FEB 17 AM 11:21

Jennifer Graham
Campaign Account
Group 11

63-9138/2631

98

DATE 02/14/23

PAY TO THE ORDER OF City of Miami Springs $ 85—

Eighty-five dollars XX/100 DOLLARS

Security Features Included. Details on Back.

TRUIST

MEMO Campaign GP11 Fee

MP

⑆263191387⑆ 1000260582 77⑈00098

SPECIALTY BLUE

© DELUXE WALLET OR DUPLICATE

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 FEB 16 AM 11:00

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)		3. Address (include post office box or street, city, state, zip code)
Jennifer E Graham		75 Deer Run Miami Springs FL 33166
4. Telephone (305) 801 1823	5. E-mail address grahamje14@gmail.com	

6. **Office sought** (include district, circuit, group number)	7. **If a candidate for a nonpartisan office, check if applicable:**
City Council GP II	☐ 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
Jennifer E Graham

11. Mailing Address	12. Telephone
75 Deer Run	(305) 801 1823

13. City	14. County	15. State	16. Zip Code	17. E-mail address
Miami Springs	Miami Dade	FL	33166	grahamje14@gmail.com

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

19. Name of Bank	20. Address
Truist	69 Westward Drive

21. City	22. County	23. State	24. Zip Code
Miami Springs	Miami Dade County	FL	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	26. Signature of Candidate
2/16/23	X [signature]

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

I, Jennifer E Graham, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☑ Campaign Treasurer ☐ Deputy Treasurer.

2/16/23 X [signature]
Date Signature of Campaign Treasurer or Deputy Treasurer

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2022

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

FOR OFFICE USE ONLY:

CITY OF MIAMI SPRINGS
2023 FEB 16 AM 11:09

LAST NAME -- FIRST NAME -- MIDDLE NAME :
Graham Jennifer E

MAILING ADDRESS :
75 Deer Run

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

NAME OF AGENCY :
~~Rep~~ City of Miami Springs

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
Council GP 11

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
Verizon	1 Verizon Way Basking Ridge NJ 07920	Telecommunications - Sales + Marketing

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")

75 Deer Run Miami Springs FL 33166
93 Springbrook Rd Old Saybrook CT 06475

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
Stock	Verizon Stock Together

CITY OF MIAMI SPRINGS

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

2023 FEB 16 AM 11:10

NAME OF CREDITOR	ADDRESS OF CREDITOR
MSBFS	14372 Heritage Parkway Fort Worth TX 76177

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		
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: 2/16/23

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.

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

CITY OF MIAMI SPRINGS
2023 FEB 16 AM 11:09

I, Jennifer E Graham,

candidate for the office of City Council GP 11;

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

X Jennifer E Graham
Signature of Candidate

2/16/23
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).

CITY OF MIAMI SPRINGS

2023 FEB 16 AM 11:09

AFFIDAVIT OF RESIDENCY

I, Jennifer E Graham, hereby file this Affidavit of Residency this 16 day of February, 2023. I reside at 75 Deer Run Miami Springs FL 33166 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.

Signature of Affiant

305 801 1823

Telephone

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me this 16th day of Feb 2023, by

Jennifer Graham.

(Name of person making statement)

Signature of Notary Public, State of Florida

Erika Gonzalez Santamaria

(Notary's name typed, printed or stamped)

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

Personally Known _____ or Produced Identification FLDL 941-0

Type of Identification Produced: FLDL