



City of Coral Gables

2020 Ponce de Leon Blvd, 12th Floor | Coral Gables, Florida 33134

www.coralgables.com

2026 General Biennial Election

A photograph of a classical building facade, likely the City of Coral Gables building. It features a prominent clock tower on the left with a white clock face and Roman numerals. The building is made of light-colored stone or concrete and has a highly ornate, classical architectural style with columns, balustrades, and decorative carvings. The sky is a clear, bright blue.

Prepared by the Office of the City Clerk

Candidate Handbook

Prepared by the Office of the City Clerk

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City of Coral Gables
2026 GENERAL BIENNIAL ELECTION
CANDIDATE HANDBOOK

May 19, 2026

Dear Candidate:

Thank you for your interest in becoming a candidate for the City of Coral Gables Commission. Our upcoming General Biennial Election is scheduled for Tuesday, November 03, 2026. There will be three open seats during this election: The Mayor's Seat – Group I, and two Commissioner Seats –Group IV and Group V. This handbook is provided for your information and is intended to assist you with the Coral Gables municipal electoral process; please pay particular attention to the items required in order to qualify as a candidate. Candidate Qualifying will begin Monday, June 8, 2026, Noon until Friday, June 12, 2026, Noon. If you have any questions or need any additional information relating to the 2026 municipal election, please contact my office at 305-569-1812 or CityClerk@coralgables.com. Additional information and resources are available at <https://www.coralgables.com/elections>

Sincerely,

Billy Y. Urquia
City Clerk

HOW TO BEGIN YOUR CAMPAIGN

Before you can begin your campaign, you must first appoint a Campaign Treasurer and designate a Campaign Depository (bank account). This is required by Florida law before any campaign funds can be raised or spent.

- **Step 1 – Appoint a Campaign Treasurer:** Complete and file Form DS-DE 9 with the City Clerk's Office before any campaign activity.
- **Step 2 – Open a Campaign Bank Account:** Open a dedicated depository account at a Florida bank. No funds may be deposited before DS-DE 9 is filed.
- **Step 3 – File Statement of Candidate:** Within 10 days of filing DS-DE 9, file Form DS-DE 84 (Statement of Candidate) with the qualifying officer.
- **Step 4 – Qualify During Qualifying Week:** Appear in person at the City Clerk's Office: Monday, June 8, 2026 (Noon) – Friday, June 12, 2026 (Noon).
- **Step 5 – Pay Qualifying Fees:** \$200.00 qualifying filing fee plus the applicable assessment fee (1% of annual salary of the office sought).
- **Step 6 – Submit All Required Documents:** Provide all required qualifying documents listed in the Qualifying Information section of this handbook.

Important: Florida law prohibits any candidate from accepting contributions or making expenditures until the Appointment of Campaign Treasurer and Designation of Campaign Depository form has been properly filed. Violation may result in civil penalties. [F.S. 106.021]



CITY OF CORAL GABLES

GENERAL BIENNIAL ELECTION ELECTION QUALIFYING DOCUMENTS

November 3, 2026

Qualifying Week:	Monday, June 8, 2026 (Noon) – Friday, June 12, 2026 (Noon)
Qualifying Officer:	Billy Y. Urquia, City Clerk
Office:	2020 Ponce de Leon Blvd, 12th Floor, Coral Gables, FL 33134
Phone:	305-569-1812 Cell: 305-733-0070

GROUP I Mayor	GROUP IV Commissioner	GROUP V Commissioner
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ELECTION OVERVIEW

Number of Seats:	3 City Commission Groups (Group I, Group IV and Group V, respectively)
Incumbent:	(Group I / Mayor) - Incumbent Vince Lago (Group IV / Commissioner) - Incumbent Melissa Castro (Group V / Commissioner) - Incumbent Ariel Fernandez
Election Date:	November 3, 2026 – General Biennial Municipal Election December 1, 2026 – Run-off Election (if required)
Qualifications:	Registered voter: U.S. Citizen; resident of Coral Gables, one year immediately prior to date of the election
Term:	Mayor - 2 years Commissioner- 4 years
Electorate:	Registered active voters in Coral Gables as of 05/18/2026 is 30,325
Last Day for Voter Registration (29 days prior to election):	Voter registration closing date General Biennial Election: October 5, 2026 Voter registration closing date for Run-Off Election: November 2, 2026

SALARIES & QUALIFYING FEES

Mayor (Group I):	\$48,612.72 annually
Commissioner (Group IV):	\$39,501.07 annually
Commissioner (Group V):	\$39,501.07 annually
City Qualifying Filing Fee:	\$200.00
Assessment Fee – Mayor/Group I (1% of annual salary):	\$486.12
Assessment Fee – Commissioner Groups IV & V (1% of salary):	\$395.01

QUALIFYING WEEK	Monday, June 8, 2026 (noon) – Friday, June 12, 2026 – (noon)
Qualifying Dates	June 8, 2026 (commencing at noon) through June 12, 2026 (noon deadline)
Qualifying Officer:	Billy Y. Urquia, City Clerk City of Coral Gables 2020 Ponce de Leon Blvd, 12th Floor Coral Gables, FL 33134 Office Phone: 305-569-1812 Cell: 305-733-0070

QUALIFYING REQUIREMENTS

• Appointment of Campaign Treasurer and Designation
• Campaign Depository (DS-DE 9)
• Statement of Candidate (DS-DE 84)
• Candidate Oath (Non-Partisan Office) / Oath of Candidate (DS-DE 302NP)
• Statement of Financial Interests – 2025 (Form 1)
• Letter of Resignation (Resign to run, if applicable, pursuant to City Charter Section 8 – 60 days prior to the date of the Election, effective 3 days following the election)
• Declaration of Candidate Intent
• Declaration for Candidates Not Automatically Covered by the Mandatory Provisions of the Miami-Dade Ethical Campaign Practices Ordinance Miami-Dade County Code at 2-11.1(c)(1)
• Voluntary Declaration and First Amendment Waiver (for Candidates who agree to comply with the Voluntary Statement of Fair Campaign Practices)
• Undue Burden Oath (if applicable)
• Biography / Resume
• Proof of Residency / Proof of Citizenship / Proof of Registered Voter Status
• Qualifying Fee (\$200)
<u>During the qualifying period, a candidate must also pay an assessment fee of 1% of the salary of the office sought.</u>
• Mayor/Group I (\$486.12 Assessment Fee)
• Commissioner/Group IV (\$395.01 Assessment Fee)
• Commissioner/Group V (\$395.01 Assessment Fee)

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

Received by _____

Date: _____

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

Sworn to and subscribed before me this _____ day of _____, 2026.

Personally known _____

Or Produced Identification _____ Notary Public – State of Florida

 (Type of Identification) My commission expires _____

 (Printed, typed, or stamped
 Commission Name of Notary Public)

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

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

OFFICE USE ONLY

Name to appear on ballot: _____

Check box if there are two last names without hyphen. (Name cannot be changed after qualifying.)

Check box if name includes nickname. (To use nickname, you must complete the Affidavit of Nickname on page 2 of this form.)

I swear or affirm that I am a candidate for the nonpartisan office of _____,
(Office)

_____, _____, _____; I am a qualified elector of _____ County, Florida;
(District #) (Circuit #) (Group or Seat #)

I am a qualified elector 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.

I swear or affirm, in addition to being a citizen of the United States, that: (Check applicable box.)

I am not a citizen of another country. I am a citizen of another country, specifically _____.

Statement of Legal Name Change: I have not legally changed my name through a petition pursuant to s. 68.07, F.S., during the 365-day period preceding the beginning of qualifying. (This does not apply to any change of name in proceedings for dissolution of marriage or adoption of children or based on a change of name conducted with a marriage certificate.)

Statement of Outstanding Fines, Fees, or Penalties: (Check applicable box. If you do owe more than \$250, you must also specify the amount owed and each entity that levied the same on page 2 of this form.)

I do not / I do owe outstanding fines, fees, or penalties that cumulatively exceed \$250, for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106. (s. 99.021(1)(d), F.S.)

()

Signature of Candidate Telephone Number Email Address

Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF _____

Signature of Officer Administering Oath
Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

Sworn to (or affirmed) and subscribed before me by means of

online notarization OR physical presence

this _____ day of _____, 20_____.

Type of Identification Produced: _____

Phonetic Spelling of Name
(Not required for qualifying)

Print the name phonetically on the line below as you wish your name to be pronounced on the audio ballot that may be used by persons with disabilities (see attached Guide for Phonetic Spelling).

Detailed Statement of Outstanding Fines, Fees, or Penalties
(Continued)

Amount	Entity

Affidavit of Nickname
(Only required if using nickname for the ballot)

My legal name is _____. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is _____. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: _____

STATE OF FLORIDA

COUNTY OF _____

Signature of Officer Administering Oath
Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence

this _____ day of _____, 20____.

Type of Identification Produced: _____

Guide for Printing Phonetic Spelling of Candidate's Name for Audio Ballot

(Do not submit this page to the filing officer)

1. Use the tables below for Phonetic Spelling of Candidate's Name on page 2 of Form.
2. Use upper case for "stressed" syllables. Use lowercase for "unstressed" syllables.
3. Use dashes (-) to separate syllables.
4. Add any notes such as rhyming examples, silent letters, etc.

Vowels			
Stressed Vowel Sounds		Unstressed Vowel Sounds	
EE	(FEET) feet	uh	(SO-fuh) sofa (FING-guhr) finger
I	(FIT) fit		
E	(BED) bed		
A	(KAT) cat (KAD) cad		
AH	(FAH-thur) father (PAHR) par		
AH	(HAHT) hot (TAH-dee) toddy		
UH	(FUHJ) fudge (FLUHD) flood		
UH	(CHUHRCH) church		
AW	(FAWN) fawn	Certain Vowel Sounds with R	
U	(FUL) full	AHR	(PAHR) par
OO	(FOOD) food	ER	(PER) pair
OU	(FOUND) found	IR	(PIR) peer
O	(FO) foe	OR	(POR) pour
EI	(FEIT) fight	OOR	(POOR) poor
AI	(FAIT) fate	UHR	(PUHR) purr
OI	(FOIL) foil		
YOO	(FYOOR-ee-uhs) furious		

Consonants			
B	(BED) bed	R	(RED) red
D	(DET) debt	S	(SET) set
F	(FED) fed	T	(TEN) ten
G	(GET) get	V	(VET) vet
H	(HED) head	Y	(YET) yet
HW	(WHICH) which	W	(WICH) witch
J	(JUHG) jug	CH	(CHUHRCH) church
K	(KAD) cad	SH	(SHEEP) sheep
L	(LAIM) lame	TS	(ITS) its
M	(MAT) mat	TH	(THEI) thigh
N	(NET) net	TH	(THEI) thy
NG	(SING-uhr) singer	ZH	(A-zuhr) azure (VI-zuhn) vision
P	(PET) pet	Z	(GOODZ) goods

Examples of Phonetically Spelled Names	
Name on Ballot	Pronounced As
Mishaud	mee-SHO ('d' is silent)
Jahn	HAHN (rhyme: fawn)
Beauprez	boo-PRAI (rhyme: hooray)
Maniscalco	man-uh-SKAL-ko
Tangipahoa	TAN-ji-pah-HO-uh
Monte	Mahn-TAI
Tanya	TAWN-yuh (not TAN)
Pittsfield	PITS-feeld
Hubbardston	HUH-buhz-tuhn

**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 filing 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):
(Please Print or Type Name)

3. Address (include PO Box or Street, City, State, Zip Code):

4. Telephone:

()

5. Candidate's Voter Registration #:

_____ (not required for qualifying purposes)

6. Email Address:

7. Office Sought (include district, circuit, group, or seat #):

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. _____ Party candidate.

10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

12. Telephone:

()

13. Email Address:

14. Mailing Address:

15. City:

16. State:

17. Zip Code:

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

20. Address:

21. City:

22. County:

23. State:

24. Zip Code:

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

25. Date:

26. Signature of Candidate:

X

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

I, _____ do hereby accept the appointment designated above as:
(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date:

29. Signature of Campaign Treasurer or Deputy Treasurer

X

2026 GENERAL BIENNIAL ELECTION
DECLARATION OF CANDIDATE INTENT,
QUALIFIED ELECTOR AND RESIDENCY AFFIRMATION

State of Florida

County of _____

City of _____

I, _____ a qualified elector and resident of _____,
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 _____,
(Office) (Group Number)

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

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.**

SIGNATURE

DATE

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

I, _____,

candidate for the office of _____;

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

I swear or affirm that I meet, or will meet at the time of election for the office sought or at the time of assuming the office, as applicable, all statutory and constitutional qualifications for the office sought.

Signature of Candidate

Date

STATE OF FLORIDA

COUNTY OF _____

Signature of Officer Administering Oath
Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

Sworn to (or affirmed) and subscribed before me by means of

online notarization OR physical presence

this _____ day of _____, 20_____.

Personally Known OR Produced Identification Type of Identification Produced: _____

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).

DECLARATION FOR CANDIDATES NOT AUTOMATICALLY COVERED

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

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

- Candidates, and their respective campaign staffs, for Miami-Dade Co. Commissioners or Mayor;
- Candidates, and their respective campaign staffs, for Miami-Dade Co. Community Councils;
- Candidates, and their respective campaign staffs, for any municipal elective office within Miami-Dade County;
- Candidates, and their respective campaign staffs, for the Co. Property Appraiser.

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

The Mandatory Fair Campaign Practices Ordinance states that a candidate shall not—

- (a) With actual malice make or cause to be made any untrue oral statement about another candidate or a member of his or her family or staff that exposes the person to hatred, contempt, or ridicule or causes the person to be shunned or avoided or injured in his or her business or occupation;
- (b) With actual malice publish, or cause to be published, by writing, printing, picture, effigy, sign, or otherwise than by mere speech any untrue statement about another candidate or a member of his or her family or staff that exposes the person to hatred, contempt, or ridicule or causes the person to be shunned or avoided or injured in his or her business or occupation;
- (c) Willfully injure, deface, or damage or cause to be injured, defaced, or damaged, by any means, any campaign poster, sign, leaflet, handbill, literature, or other campaign material of another candidate;
- (d) Knowingly obtain, or cause to be obtained, the campaign property of another candidate with the intent to temporarily or permanently deprive the candidate of a right to the property or its benefit; *or*
- (e) Knowingly file with the Ethics Commission a groundless or frivolous complaint against another candidate.

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

I, _____, a candidate for the office of
please print your name

_____ in _____,
elective office sought county, municipality, or other jurisdiction

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

X

Signature

Date

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

AN EXPLANATION REGARDING YOUR RIGHTS

Section 2-11.1.1(D)(2) of the Code of Miami-Dade County, Florida, provides that any candidate for public office in Miami-Dade County may at any time ***voluntarily*** declare that he or she agrees to abide by the ***voluntary*** Statement of Fair Campaign Practices. In agreeing to abide by the ***voluntary*** Statement of Fair Campaign Practices, the candidate recognizes, as compulsory, the authority of the Miami-Dade County Commission on Ethics and Public Trust to decide whether the candidate has violated the ***voluntary*** Statement of Fair Campaign Practices and, if so, to impose the appropriate penalty, if any.

Before agreeing to abide by the ***voluntary*** Statement of Fair Campaign Practices, you should carefully read the ***voluntary*** Statement of Fair Campaign Practices included with this DECLARATION AND FIRST AMENDMENT WAIVER as well as the following information regarding your rights.

The Statement of Fair Campaign Practices is ***voluntary***. You are under no obligation to agree to the ***voluntary*** Statement of Fair Campaign Practices. If you decide not to agree to the ***voluntary*** Statement of Fair Campaign Practices, you may still run for elective office in Miami-Dade County if you are qualified. There is NO PENALTY if you decide not to sign the ***voluntary*** Statement of Fair Campaign Practices.

If you decide to agree to the ***voluntary*** Statement of Fair Campaign Practices, you should know that you will be WAIVING YOUR FIRST AMENDMENT RIGHTS TO FREE SPEECH because certain speech prohibited by the ***voluntary*** Statement of Campaign Practices is protected by the First Amendment to the U.S. Constitution and Article I, Section 4, of the Florida Constitution. Prior to agreeing to comply with the ***voluntary*** Statement of Fair Campaign Practices, you should consider consulting an attorney to ensure that you understand the consequences of signing the DECLARATION AND FIRST AMENDMENT WAIVER.

Before signing this DECLARATION AND FIRST AMENDMENT WAIVER, you have the right to request and receive from the Ethics Commission an advisory opinion as to whether your planned campaign activities (e.g., campaign advertisement or statements) are likely to violate the ***voluntary*** Statement of Fair Campaign Practices. In the event that you sign the DECLARATION AND FIRST AMENDMENT WAIVER, you will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that you may be considering.

A determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER shall not be construed by Miami-Dade County or the Ethics Commission to mean that the candidate is unethical in any way. Further, a determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER should not be construed by any candidate or any other person or entity to mean that the candidate is unethical in any way.

INSTRUCTIONS

The DECLARATION AND FIRST AMENDMENT WAIVER, which includes the ***voluntary*** Statement of Fair Campaign Practices, can be found on page 2 of this form. If you are a candidate for county office and agree to abide by the ***voluntary*** Statement of Fair Campaign Practices, please sign the DECLARATION AND FIRST AMENDMENT WAIVER and file with the Miami-Dade Commission on Ethics and the **Miami-Dade County Office of the Supervisor of Elections**. If you are a candidate for municipal office and agree to abide by the ***voluntary*** Statement of Fair Campaign Practices, please sign and file with the Miami-Dade Commission on Ethics and your respective municipal clerk. For further information, contact the Miami- Dade Office of Governmental Affairs at 305 499-8410.

Miami-Dade Commission on Ethics
19 W. Flagler St., Suite 820
Miami, FL 33130

Miami-Dade County Office of the Supervisor of Elections
2700 NW 87th Ave. or P.O. Box 521550 Doral, FL 33172
Miami, FL 33152-1550

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

VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES

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

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

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

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

I, _____, a candidate for the office of

please print your name

in _____,

elective office sought

county, municipality, or other jurisdiction

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

X

Signature

Date

Biography/Resume

Form 6

Full and Public Disclosure of Financial Interests

File electronically via

Electronic Financial Disclosure Management System (EFDMS)

Copy of Driver's License

Office of the Property Appraiser
Summary Report

FPL Bill (Optional)

Utility Bill

Proof of Citizenship
(Copy of Valid Passport/Birth Certificate
Or Voter Registration Card)

Copy of Check and Receipt of
Qualifying Fees