



SOURCE OF INCOME STATEMENT

Section 2-11.1(i) of the County Ethics Code requires that certain employees and public officials file a financial disclosure Statement on a yearly basis by July 1st of every year.

| | | | |
|---|-----------|------------|---------------------|
| Disclosure for Tax Year Ending | Last Name | First Name | Middle Name/Initial |
| Mailing Address – Street Number, Street Name, or P.O. Box | | | |
| City, State, Zip | | | |

If your home address is your mailing address, and your home address is exempt from public records pursuant to Fla. Stat. §119.07, read instructions on the following page **and check here.**

Filing as an Employee (check one)

| | | |
|--|----------------|------------------------------|
| <input type="checkbox"/> County <input type="checkbox"/> Public Health Trust <input type="checkbox"/> Municipal: _____ (Municipality) | | |
| Department | | |
| Position or Title | | Employee ID Number |
| Work address | Work telephone | Employment began on/ended on |

Filing as a Board Member (check one)

| | | |
|---|----------------|------------------------|
| <input type="checkbox"/> County <input type="checkbox"/> Municipal: _____ (Municipality) | | |
| Board where serving | | |
| Alternate address (if home address is exempt) | Work telephone | Term began on/ended on |

List below every source of income you received, along with the address and the principal activity of each source. Include your public salary. Place the sources of income in descending order, with the largest source first. Examples of sources of income include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, and social security payments. Also, include any source of income received by another person for your benefit. However, the income of your spouse or any business partner need not be disclosed. **If continued on a separate sheet, check here.**

| Name of Source of Income | Address | Description of the Principal Business Activity |
|--------------------------|---------|--|
| | | |
| | | |
| | | |

I hereby swear (or affirm) that the information above is a true and correct statement.

Signature of Person Disclosing

Date signed

| |
|---|
| RECEIVED BY ELECTIONS DEPARTMENT: <input type="checkbox"/> Hardcopy <input type="checkbox"/> Electronic Copy |
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SOURCE OF INCOME INFORMATION

Required by the Miami-Dade County Code, Section 2-11.1(i)

The term INCOME shall include, but is not limited to, the following items: wages, salaries; tips; bonuses; commissions & fees; dividends, interest; profits from businesses and professions; your share of profits from partnerships and small business corporations; pensions, annuities & endowments; profits from the sale or exchange of real estate, securities or other property, including personal residence; rents and royalties; your share or estate or trust income, including accumulated distributions; alimony, separate maintenance or support payments; prizes, awards and gifts; fees as an Executor, Administrator or Director; disability retirement payments; workmen's compensation, insurance; damages; social security payments, etc.

FILING INSTRUCTIONS

A "Source of Income Form," or a copy of the personal income tax forms may be filed to satisfy the filing requirement for County/Public Health Trust employees, municipal employees, and advisory board members not required to file under State law. State filers who file their forms with the Florida Commission on Ethics and also hold County or Municipal positions (for example, judges who also serve on County or Municipal boards) meet the County financial disclosure requirement by filing a copy of their state form with the Miami-Dade County Elections Department or their Municipal clerk.

All persons subject to annual financial disclosure filing requirements must file the appropriate form no later than 12:00 noon of July 1st of each year, including the July 1st following the last year that person is in office or held such employment, in accordance with Section 2-11.1(i) of the Miami-Dade County Code.

This form should not be used as a substitute for State Form 1 for those required to file under state requirements.

City of Miami Beach Personnel and Miami Beach Board & Committee members shall file completed forms with:

**Office of the City Clerk
Attn: Charles D'Agostin
1700 Convention Center Dr.
Miami Beach, FL 33139**

or

Via email:

CharlesDagostin@miamibeachfl.gov

Note RE: Florida Statutes § 119.07: The role of our office is to receive and maintain forms filed as public records. If your home address is exempt from disclosure and you do not wish your home address to be made public, please use your office or other address for your mailing address. The following persons are exempt from disclosing their home addresses: active or former law enforcement personnel, including correctional and correctional probation officers, personnel of the Department of Children and Family Services whose duties include the investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities, personnel of the Department of Health whose duties are to support the investigation of child abuse or neglect, and personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement; firefighters; justices and judges; current or former state attorneys, assistant state attorneys, statewide prosecutors, or assistant statewide prosecutors; county and municipal code inspectors and code enforcement officers.