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CANDIDATE QUALIFYING REQUIREMENTS
QUALIFYING PERIOD
Noon, July 26, 2016 to Noon, August 12, 2016
NOVEMBER 8, 2016 ELECTION

CANDIDATE:

JAVIER GIRAUD

POSITION:

VICE MAYOR
08-11-16A10:24 RCVD

PICKED UP PACKAGE: 9ARNV
08-10-16A11:42 RCVD

COMPLETED PACKAGE:
08-11-16P03:12-ARJV
08-11-16A10:24 RCVD

Qualifying Checklist:

X

Provided proof of Voter's Registration (for file)

X

Affidavit of Candidacy and Residency, Notarized AND Driver's License (for file)

08-10-16 - X

Appointment of Campaign Treasurer and Designation of Campaign Depository Form DS-DE 9

08-10-16 - X

Statement of Candidate DS-DE 84

~~united~~

Statement of Fair Campaign Practices

X

Loyalty Oath / Oath of Candidate DS-DE 25

X

Form 1 Statement of Financial Interests

X

Qualifying Fee of \$100.00 (Paid by Campaign Acct. Check No. 98)

X

State Election Assessment (Paid by Campaign Acct. Check No. 99)
One percent of annual salary (\$76.17 for Vice Mayor and Council Members – annual salary is \$7,617.36)



CANDIDATE CAMPAIGN INFORMATION RECEIPT
QUALIFYING PERIOD
Noon, July 26, 2016 to Noon, August 12, 2016

NOVEMBER 8, 2016 GENERAL ELECTION

I, Javier Giraud, HEREBY ACKNOWLEDGE RECEIPT OF A
CANDIDATE QUALIFYING INFORMATION PACKAGE ON THIS 10 DAY OF August, 2016.

The following items shall be filed with the Town Clerk prior to the end of the qualifying period
(August 12, 2016 at Noon) in order to qualify to be placed on the ballot for the November 8, 2016
General Election:

- X Provided proof of Voter's Registration (for file)
- X Affidavit of Candidacy and Residency, Notarized & Driver's License (for file)
- 08-10-16 - X Appointment of Campaign Treasurer and Designation of Campaign Depository Form DS-DE 9
- 08-10-16 - X Statement of Candidate DS-DE 84
- invited Voluntary Statement of Fair Campaign Practices
- X Oath of Candidate DS-DE 25
- X Form 1 Statement of Financial Interests
- X Qualifying Fee of \$100.00 (Paid by Campaign Acct. Check No. 98)
- X State Election Assessment (Paid by Campaign Acct. Check No. 99)
One percent of annual salary (\$76.17 for Vice Mayor and Council Members - annual salary is \$7,617.36)



Further important information provided to the candidate:

- Town of Cutler Bay Ordinance 15-06 – Establishing Qualifying Period for 2016 Election
- Town of Cutler Bay Ordinance 06-11 – Campaign Contributions by a Vendor
- Town of Cutler Bay Town Charter
- Town of Cutler Bay Council District Map
- Town of Cutler Bay Election Sign Regulations
- 2016 Calendar of Reporting Dates
- Candidate and Treasurer's Handbook
- Compilation of Election Laws 2015
- Miami Dade County Poll Watcher Information
- Town of Cutler Bay Precinct List
- Sunshine Guide and Code of Ethics Publication
- Financial Forms: (Summary, Expenditures, Contributions, Waiver)

Javier Giraud
Signature

8-10-2016
Date

Pursuant to F.S. 99.061(7)(c), the Town Clerk, as filing officer, performs a ministerial function in reviewing qualifying papers. In determining whether a candidate is qualified, the filing officer shall review the qualifying paper to determine whether all items required have been properly filed and whether each item is complete on its face. The filing officer may not determine whether the contents of the qualifying papers are accurate. Please be advised that the information contained herein is intended as a reference guide only. The Town Clerk's Office will provide assistance to candidates; however, it is not the responsibility of this Office to interpret Florida Statutes.



08-11-16A 10:21 RCVD

RECEIVED
AUG 11 2013
Clerks Ofc.

Office of the Town Clerk

Jacqueline N. Wilson
Town Clerk

AFFIDAVIT OF CANDIDACY AND RESIDENCY

I, Javier Giraud, hereby file this Affidavit of Candidacy and Residency this 28 day of July, 2016, for the office of Vice-Mayor of the Town of Cutler Bay, Florida for the General Election to be held on November 8, 2016.

I swear and affirm that I am qualified elector pursuant to Section 5.1(A) of the Town Charter and have resided in the Town of Cutler Bay for at least two years preceding my qualifying date and that I have resided in the Residential Area for which I propose to represent on the Town Council continuously for at least one year preceding my qualifying date as required by Section 2.4 of the Town Charter.

Javier Giraud
Signature

Javier Giraud
Print Name

20920 SW 85 Place
Address
(305) 781-8660
Telephone

javielmo@aol.com
Email

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

BEFORE ME personally appeared who executed this Affidavit of Candidacy and Residency on this 28 day of July, 2016.



Jacqueline N. Wilson
NOTARY PUBLIC - STATE OF FLORIDA

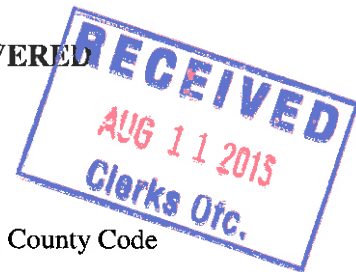
SEAL/COMMISSION EXPIRES: May 29, 2018

PERSONALLY KNOWN TO ME

PRODUCED THE FOLLOWING IDENTIFICATION: _____



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, Javier Girsud, a candidate for the office of
please print your name
Vice-Mayor in Town of Cutler Bay,
elective office sought county, municipality, or other jurisdiction

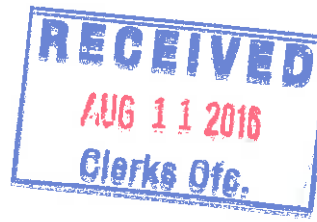
understand that I am not automatically bound by the Mandatory Fair Campaign Practices Ordinance of Miami-Dade Co. Nevertheless, I choose to abide by the Mandatory Fair Campaign Practices Ordinance and recognize the compulsory jurisdiction of the Ethics Commission and its authority to decide whether I 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.

*
Signature

8-10-2016
Date

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)



08-11-16A10:22 RCVD

OFFICE USE ONLY

OATH OF CANDIDATE
(Section 99.021, Florida Statutes)

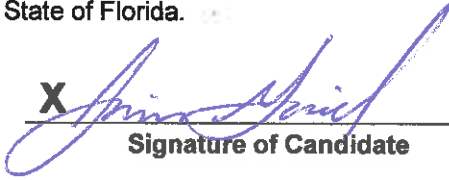
I, Javier Giraud

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * – NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of Vice-Mayor, _____
(office) (district #)

_____; I am a qualified elector of Miami-Dade County, Florida;
(circuit #) (group or seat #)

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

X 

Signature of Candidate

(305) 781-8660

Telephone Number

javielmo@aol.com

Email Address

20920 SW 85 Place
Address

Cutler Bay
City

Florida
State

33189
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 109314514

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

Ha-Vee-Air Gee-row

STATE OF FLORIDA

COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 28 day of July, 2016.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____


Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public



FORM 1

STATEMENT OF FINANCIAL INTERESTS

2015

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Giraud, Javier Eduardo

MAILING ADDRESS :

20920 SW 85th Place

CITY :

Cutler Bay

ZIP :

33189

COUNTY :

Miami-Dade

NAME OF AGENCY :

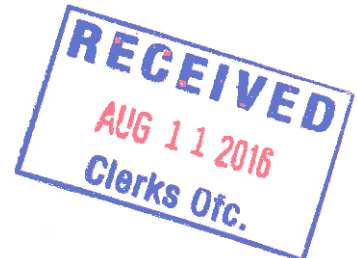
Town of Cutler Bay

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Vice-Mayor

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE



05-11-15A10:22 RCVD

**** **BOTH PARTS OF THIS SECTION MUST BE COMPLETED** ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2015 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

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
Insurance Claim Law Firm	3870 SW 137th Avenue, Miami, Fl 33175	Legal Services related to insurance claim
Self employed Attorney	3870 SW 137th Avenue, Miami, Fl 33175	Legal Services non-insurance related

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")

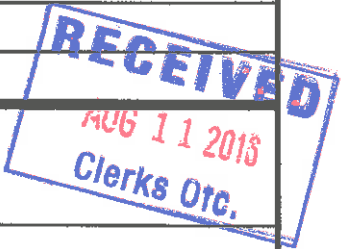
2117-1 Timber Lake Circle, Vero Beach, Florida 32966
Vacant Land SW 87th Avenue and 200 Terr. Cutler Bay Florida

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
(If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Stock Investment Account	Scottrade
Cash on Hand	Wells Fargo Bank



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

NAME OF CREDITOR	ADDRESS OF CREDITOR
Continental National Bank	1801 SW 1st Street, Miami, Florida 33135

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


NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	Insurance Claim Law Firm PA	Chantarelle Properties
ADDRESS OF BUSINESS ENTITY	3870 SW 137th Avenue, Miami, Florida 33175	20920 SW 85th Place, Cutler Bay, Florida 33189
PRINCIPAL BUSINESS ACTIVITY	Legal Services	Land holdings
POSITION HELD WITH ENTITY	Attorney	President
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes	Yes
NATURE OF MY OWNERSHIP INTEREST	100% ownership	100% ownership

PART G — TRAINING
For elected municipal officers 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: 8-4-16

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:

<p>WHAT TO FILE:</p> <p>After completing all parts of this form, <u>including signing and dating it</u>, send back only the first sheet (pages 1 and 2) for filing.</p> <p>If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).</p> <p>NOTE: MULTIPLE FILING UNNECESSARY: A candidate who previously filed Form 1 because of another public position must file a copy of his or her Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.</p> <p><u>Facsimiles will not be accepted.</u></p>	<p>WHERE TO FILE:</p> <p>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.</p> <p>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.)</p> <p>State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.</p> <p>Candidates file this form together with their qualifying papers.</p> <p>To determine what category your position falls under, see page 3 of instructions.</p>	<p>WHEN TO FILE:</p> <p>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.</p> <p>Thereafter, file by July 1 following each calendar year in which they hold their positions.</p> <p>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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2015.</p>
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STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY




08-03905 P00922-ARNV RCVD

08-10-16A11:33 RCVD

I, Javier Giraud,

candidate for the office of Vice-Mayor;

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

X 
Signature of Candidate

7-28-2016
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).

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

(PLEASE PRINT OR TYPE)



08-10-16A11:32 RCVD

08-10-16A11921-AR

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

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

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

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

Javier Giraud

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

20920 SW 85 place
Cutler Bay, Florida 33189

4. Telephone

(305) 781-8660

5. E-mail address

javierlmo@aol.com

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

Vice-Mayor

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

Javier Giraud

11. Mailing Address

20920 SW 85 place

12. Telephone

(305) 781-8660

13. City

Cutler Bay

14. County

Miami-Dade

15. State

FL

16. Zip Code

33189

17. E-mail address

javierlmo@aol.com

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

19. Name of Bank

Soutrust Bank

20. Address

11291 Bird Road

21. City

Miami

22. County

Miami-Dade

23. State

Florida

24. Zip Code

33165

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

7-28-2016

26. Signature of Candidate

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

I, Javier Giraud, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

7-28-2016
Date

Signature of Campaign Treasurer or Deputy Treasurer