

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

**CANDIDATE:**

JAVIER GIRAUD

**POSITION:**

VICE MAYOR 08-11-16 AT 10:24 RCVD

PICKED UP PACKAGE: 9ARNV  
08-10-16 AT 11:42 RCVD

COMPLETED PACKAGE: 9ARNV  
08-11-16 AT 10:24 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

-unrec-

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
- invoked 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)

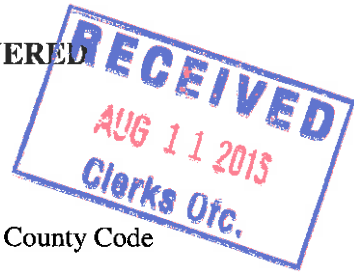
Javier Giraud  
Signature

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.



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

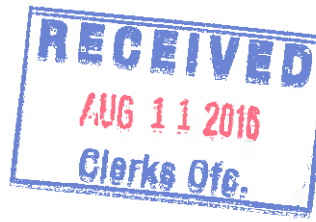
understand that I am not automatically bound by the Mandatory Fair Campaign Practices Ordinance of Miami-Dade Co. Nevertheless, I choose to abide by the Mandatory Fair Campaign Practices Ordinance and recognize the compulsory jurisdiction of the Ethics Commission and its authority to decide whether I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

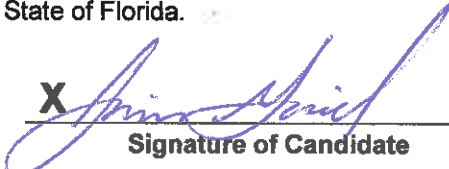
I, Javier Giraud

(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.

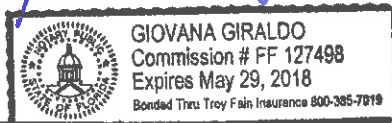
Personally Known:  or

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")

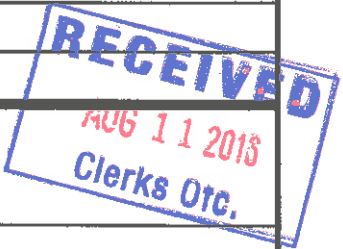
2117-1 Timber Lake Circle, Vero Beach, Florida 32966  
 Vacant Land SW 87th Avenue and 200 Terr. Cutler Bay Florida

**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><b>WHAT TO FILE:</b></p> <p>After completing all parts of this form, <b>including signing and dating it</b>, 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><b>NOTE:</b> <b>MULTIPLE FILING UNNECESSARY:</b> 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><b>Facsimiles will not be accepted.</b></p>	<p><b>WHERE TO FILE:</b></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><b>Local officers/employees</b> 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><b>State officers or specified state employees</b> 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><b>Candidates</b> 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><b>WHEN TO FILE:</b></p> <p><b>Initially</b>, each local officer/employee, state officer, and specified state employee must file <b>within 30 days</b> 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. <b>Candidates</b> must file at the same time they file their qualifying papers.</p> <p><b>Thereafter</b>, file by July 1 following each calendar year in which they hold their positions.</p> <p><b>Finally</b>, 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 <b>not</b> 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**

javiermo@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**

javiermo@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**

X *Javier Giraud*

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

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

designated above as:  Campaign Treasurer     Deputy Treasurer.

7-28-2016

Date

X *Javier Giraud*  
Signature of Campaign Treasurer or Deputy Treasurer