AFFIDAVIT OF RESIDENCY OF CANDIDATE

CITY OF NORTH MIAMI, FLORIDA

RECEIVED
MAR 29 2011
CITY CLERKS OFFICE

COUNTY OF MIAMI-DADE)
CITY OF NORTH MIAMI)

Jacques Despinosse (hereinafter "affiant"), being first duly sworn, deposes and says:

1. My name is Jacques Despinosse

2. For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below.
For those candidates seeking the office of Councilperson, please check and fill in the blank in subsection (b) below:

X (a) I am offering myself as a candidate for the office of Mayor of the City of North Miami, Florida. If elected, I fully understand that I must maintain my primary actual and real residence within the City of North Miami for the duration of my term of office.

_____ (b) I am offering myself as a candidate of the office of Councilperson in District Number ___ of the City of North Miami, Florida. If elected, I fully understand that I must maintain my primary actual and real residence within the district for the duration of my term of office.

_____ (c) I am offering myself as a candidate of the office of City Clerk of the City of North Miami, Florida. If elected, I fully understand that I must maintain my primary actual and real residence within the City of North Miami for the duration of my term of office.

3. I have resided in the City of North Miami for a minimum of one year before qualifying if applying for Mayor, and one year in the district if applying for Councilperson, and I have been a registered voter and a fully qualified elector of the City of North Miami, Florida, for at least one year prior to qualifying and I am presently registered to vote in Precinct No. 170. Copy of voter registration card is attached.

I presently reside at the following address (must include zip code):

95 NE 131 ST North Miami Fl 33161,
which is my legal address, and I have resided continually at said address from the 17 day of November, 1990 to the present.

4. In addition to the residence that I have listed as my present address, I also reside at the following listed addresses on a temporary basis as a secondary domicile or domiciles:

None

5. Affiant's spouse resides at the following address: (must include city, state and zip code)

Same

6. Affiant's minor children reside at the following address: (must include city, state and zip code)

None

7. At the present time, affiant (is) (is not) registered to vote in any city, county or state other than as stipulated is subparagraph 3.

8. I am the owner or tenant at the residence set forth in subparagraph 3. I am (am not) attaching a copy of my Real Estate Tax bill or lease.

9. U.S. Mail is delivered to me at the address listed in subparagraph 3. I am (am not) attaching copies of mail delivered to me.

10. My automobile, boat, trailer registration reflects my address in subparagraph 3. I am (am not) attaching copies of such registration(s).

11. I pay all or part of utility bills at the residence in subparagraph 3. I am (am not) attaching copies of such bills, water, sewer, phone, cable, etc.

12. My individual Federal Income Tax returns reflect the address in subparagraph 3. I am (am not) attaching copy of top portion of Federal Income Tax Return or letter from Tax Return preparer.

13. I do not claim homestead exemption at any other address.

The above statements are true and correct to the best of my ability.
I understand that the making of any false statement on this affidavit could subject me to perjury charges, a second degree misdemeanor pursuant to Section 837.06 of the Florida Statutes.

SIGNED THIS 29 DAY OF March 2011.

RECEIVED MAR 29 2011 CITY CLERKS OFFICE

AFFIANT

BEFORE ME, the undersigned authority, personally appeared Jacques Despinosse,

who, after first being duly sworn, deposes and states that he executed the foregoing to the best of his knowledge and belief.

Jacqui Vieira

CITY CLERK,
CITY OF NORTH MIAMI, FLORIDA

(SEAL)

✓ personally known

Notary Public State of Florida
Jacqualine Vieira
My Commission DD726372
Expires 11/09/2011

✓ Did take an oath

✓ Produced identification

Type of identification produced: Drivers license + voters registration

RECEIVED
MAR 29 2011
CITY CLERKS OFFICE

NORTH MIAMI
FLORIDA

RECEIVED
MAR 29 2011
CITY CLERKS OFFICE

CONTENTS OF PACKET

1. Notice of Election, Resolution No. R-2011-4
2. Ordinance #1275, Establishing Proof of Residency
3. Ordinance #1315, Political Signs
4. Candidate Qualifying Information
5. Qualifying Fees for Upcoming Elections – Memo to Candidates
6. Candidate & Campaign Treasurer Handbook – July 2010
7. List of Qualifying Dates and Financial Filing Dates
8. Guide to Sunshine Amendment and Code of Ethics for public officers and employees - 2011
9. A Compilation of The Election Laws of the State of Florida – October 2010
10. North Miami Charter
11. North Miami Election Code
12. List of Precincts & Voter Precinct Map
13. Campaign Skills Seminar Invitation

If any additional forms are needed, they may be obtained from the Office of the City Clerk, 776 N.E. 125th Street, North Miami, Florida 33161 during normal business hours.

Checked By _____ Date 3/29/11

Received By _____ Date 3/29/11

CANDIDATES:

PLEASE NOTE: QUALIFYING BEGINS MARCH 28 THROUGH APRIL 5, 2011, 5:00 PM EASTERN STANDARD TIME

City of North Miami

776 Northeast 125th Street, P.O. Box 619085, North Miami, Florida 33261-9085

(305) 893-6511

RECEIVED
MAR 29 2011
CITY CLERKS OFFICE

I, the undersigned and elector of the City of North Miami, Florida whose residence is: JACQUES DESPINOSSE

Hereby announce my candidacy for the Office of Mayor

to be voted at the Election to be held on the 10th day of May, 2011, and I hereby agree to serve if elected.

Signature of Candidate: _____

Date and hour of filing: 3/29/11

Received by: _____
(Signature of Electing Official)

RECEIVED
MAR 29 2011
CITY CLERKS OFFICE

LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

NONPARTISAN OFFICE

OFFICE USE ONLY

I, JACQUES (First Name) Alexandre (Middle Name/Initial) DESPINOSSE (Last Name)

a citizen of the State of Florida and of the United States of America, and being [a *candidate for public office*] do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Important: *If elected, a candidate must retake the loyalty oath as specified in s. 876.05, Florida Statutes, and that oath shall be filed with the records of the governing official or employing governmental agency prior to the approval of payment of salary, expenses, or other compensation.*

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, JACQUES DESPINOSSE

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

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; by executing this form, I have taken the oath required by ss. 876.05-876.10, Florida Statutes; 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.

X _____ Signature of Candidate ( ) _____ Telephone Number _____ Email Address

95 NE 131ST North Miami Fl. 33161

Address City State ZIP Code

* 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):

_____

STATE OF FLORIDA

COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 29 **day of** March, **20** 11.

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced: _____

Notary Public State of Florida
Jacqueline Vieira
My Commission DD726372
Expires 11/09/2011

Jacqueline Vieira
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2010

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

LAST NAME -- FIRST NAME -- MIDDLE NAME : Despinosse Jacques Alexandre

MAILING ADDRESS : 95 NE 131 ST

North Miami FL 33161

CITY : ZIP : COUNTY : Dade County

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

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

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

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, 2010 / OR ☐ SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:_____

MANNER OF CALCULATING REPORTABLE INTERESTS:
THE LEGISLATURE ALLOWS FILERS 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one):

☐ COMPARATIVE (PERCENTAGE) THRESHOLDS OR ☐ DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]
(If you have nothing to report, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Despinosse Consultant Services	8218 NE 2nd Ave Miami	Immigration translation and citizenship assistance

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]
(If you have nothing to report , you must write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]
(If you have nothing to report, you must write "none" or "n/a")

Received MAR 29 2011 Office

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.

OTHER FORMS you may need to file are described on page 6.

(Continued on reverse side)

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

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

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

NAME OF CREDITOR	ADDRESS OF CREDITOR

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
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			

RECEIVED MAR 29 2011 CITY CLERK'S OFFICE

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

SIGNATURE (required): **DATE SIGNED (required):** 3/29/11

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

NOTE:
MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:

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.

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.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

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 for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

RECEIVED
MAR 29 2011
OFFICE

VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES

As a candidate for public office in the City of North Miami, 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, I and members of my campaign staff:

1. Shall not make my race, religion, national origin, gender, physical disability or sexual orientation an issue in my campaign.
2. Shall not make my opponents' race, religion, national origin, gender, physical disability or sexual orientation an issue in my campaign.
3. Will condemn any appeal to prejudice based on race, religion, national origin, gender, physical disability or sexual orientation.
4. Shall not without just cause attach or question my opponent's patriotism.
5. Shall not punish, display or circulate any anonymous campaign literature or political advertisement.
6. Shall not tolerate my supporters engaging in these activities which 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 which resorts to the methods and tactics I condemn.
7. Shall run a positive campaign emphasizing my qualifications for office and positions on issues of public concern.
8. Will limit remarks on an opponent to legitimate challenges to that person's record, qualifications and positions.
9. Will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor make or condone unfounded accusations discrediting that person's credibility.
10. Will take personal responsibility for approving or disapproving the substance of attacks on my opponent that may come from third parties supporting my candidacy.
11. Will not use or permit the use of campaign material that falsified, distorts, or misrepresents facts.

(2) *Agreement to abide by Statement of Fair Campaign Practices.* A candidate for public office in the City of North Miami as described in subsection (A) may at any time declare to abide by the Statement of Fair Campaign Practices, and to recognize as compulsory the jurisdiction of the Ethics Commission (a) to decide whether the candidate has violated the Statement of Fair Campaign Practices and, if so (b) to impose the appropriate penalty. The Declaration shall be on a form approved by the Ethics Commission and shall be irrevocable. Copies of the declaration form shall be on file with the Ethics Commission, the Miami-Dade County

Supervisor of Elections and the City Clerk. Declarations shall be filed with the Ethics Commission.

(3) *Penalty.* In addition to any other penalty provided by law, a finding by the Ethics Commission that a candidate has violated one (1) or more of the voluntary fair campaign practices shall subject the candidate to an admonition or public reprimand.

CANDIDATE'S SIGNATURE

RECEIVED
MAR 29 2011
CITY CLERKS OFFICE