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OFFICE OF THE CITY CLERK
CITY OF MIAMI, FL

AFFIDAVIT OF CANDIDATE
CITY OF MIAMI, FLORIDA

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF MIAMI)

Richard P. Dunn II (hereinafter "affiant"), being first duly sworn, deposes and says:

1. My name is Richard P. Dunn II
2. For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below. Those candidates seeking the office of Commissioner please check and fill in the blank in subsection (b) below:
 - (a) I am offering myself as a candidate for the office of Mayor of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of Miami for the duration of my term of office.
 - (b) I am offering myself as a candidate of the office of Commissioner in District Number 5 of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the district for the duration of my term of office.
3. I have resided in the City of Miami for a minimum of one year before qualifying if applying for Mayor, and one year in the district if applying for the Commission, and I am a registered voter and a duly qualified elector of the City of Miami, Florida, presently registered to vote in precinct No. 512.

I presently reside at the following address (must include zip code):
1895 NW 57th Street MIAMI, FL 33142,
which is my legal address, and I have resided continually at said address from the 18th day of December, 1999 to the present.

4. Immediately prior to residing at the above-stated address, I have resided at the hereinbelow listed addresses for the cited periods of time (list hereinbelow all addresses at which you have resided for the past five years, as well as the length of time at each address):

Prior Addresses	For the Period
_____	_____
_____	_____

5. 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:
N/A

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

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

N/A

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

9. Name and business address of affiant's employer:

Faith Community Baptist Church
10401 N.W. 9th Avenue Miami, FL 33150

10. Affiant's occupation: Senior Pastor

11. Affiant has been employed in the above-cited capacity for the following period of time:

5 years

(Note: In the event the occupation of affiant has been for a period of less than one year, or the employment period with the same employer has been for a period of less than one year, affiant shall give the name(s) and address(es) of his/her employer(s) and occupation(s) for the period of one year prior to the date of this affidavit).

N/A

12. Affiant represents that he/she (is) (is not) currently holding another elective or appointive office – whether city, county or municipal – the term of which or any part thereof runs concurrently with that of the office he/she seeks, and that he/she has resigned from any office from which he/she is required to resign pursuant to F.S.99.012 and/or the City of Miami Charter.

13. Affiant represents that, as of this date, he/she (is) (is not) seeking to qualify for public office which is currently held by an officer who has authority to appoint, employ, promote, or otherwise supervise him/her and who has qualified as a candidate for reelection to that office. (Note: If affiant is an employee of the City of Miami (other than city manager, city attorney, independent auditor general or city clerk) or member of a city board of the City of Miami, Florida (other than a city commissioner or mayor), affiant in the case of an employee shall take a leave of absence, without pay from his/her employment during the period in which affiant is seeking election to public office or in the case of a board member such member shall resign and such leave of absence or resignation to be effective upon whichever occurs first:

- (a) such employee or board member receives contributions or makes expenditures, or gives her or his consent for any other person to receive contributions or make expenditures, with a view to bringing about his or her nomination or election to public office; or
- (b) at the time such employee or board member appoints a campaign treasurer and designates a primary depository; or
- (c) at the time such employee or board member files qualification papers and subscribes to a candidates oath as required by law.

The definition of "city board" is found in Section 2-882 of the Miami City Code.

14. Affiant's campaign headquarters address and telephone number:

6702 Biscayne Boulevard 786-431-7307

Affiant's campaign treasurer's name:

Claytona Owens-Fields

*Affiant's campaign treasurer's address:

20820 NW 34th Avenue MIAMI GARDENS, FL

Telephone numbers: (work) 786-290-4854

33056

(home) _____

*[A Campaign Treasurer or Deputy Treasurer shall be a registered voter in the State of Florida.]

15. Affiant represents that, if elected, he/she shall serve in the elective office to which he/she seeks election.

16. Following is the exact way in which affiant would like to have his/her name printed on the official ballot:

Richard P. Dunn II

SIGNED THIS 9th DAY OF September, 2013

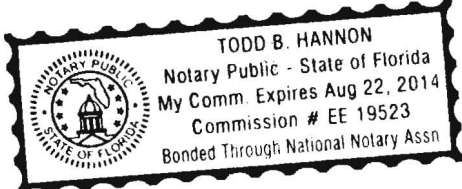
Richard P. Dunn II
AFFIANT

BEFORE ME, the undersigned authority, personally appeared Richard P. Dunn, II, who, after first being duly sworn, deposes and states that Richard P. Dunn, II executed the foregoing to the best of his knowledge and belief.

Todd B. Hannon

CITY CLERK,
CITY OF MIAMI, FLORIDA

(SEAL)



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CITY OF MIAMI, FL

Did take an oath

Produced identification

Type of identification produced: FL Driver's License

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

FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Denn, Richard D.

MAILING ADDRESS :

1895 N.W. 57th Street

CITY :

Miami

ZIP :

33142

COUNTY :

Miami-Dade

NAME OF AGENCY :

City of Miami

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Commissioner, District 5

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

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**** 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, 2012 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). CHECK THE ONE YOU ARE USING:

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, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Faith Community Baptist Church	1441 N.W. 38th Ave	Senior Pastor

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
W/A			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, you must write "none" or "n/a")

N/A

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, you must write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
N/A	

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
Oakmen Financial Corp	P.O. Box 795097 Orlando, FL 32878-5097
American Education Service	Harrisburg, PA 17103-2461 (P.O. Box 2461)
U.S. Dept. of Education	P.O. Box 1144 Greenville, TX 75042-9144

PART F — INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses - See instructions)
(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			

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

SIGNATURE (required):

DATE SIGNED (required):

[Handwritten Signature]

9/9/13

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).

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.

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.

Facsimiles will not be accepted.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2012.

CANDIDATE OATH -
CANDIDATE WITH NO PARTY AFFILIATION

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CITY OF MIAMI, FL

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, Richard P. Dunn II
(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 with no party affiliation for the office of City of Miami Commissioner District 5
(office) (district #)

1, 1; 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] 786 344-7770 votedunn2013@gmail.com
Signature of Candidate Telephone Number Email Address

1895 N.W. 57th Street Miami FL 33142
Address City State Zip Code

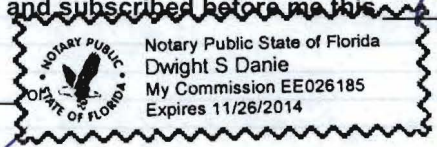
Candidate's Florida Voter Registration Number (located on your voter information card): 109024022

* 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 9 day of September, 2013.

Personally Known:
Produced Identification:



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

Type of Identification Produced: Driver's License

LOYALTY OATH

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STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF MIAMI)
(Please Print)

I, Richard _____ P. _____ Dunn _____
First Name Middle Initial Last Name

a citizen of the State of Florida and of the United States of America, ... and 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.

[Signature]
Signature of Candidate

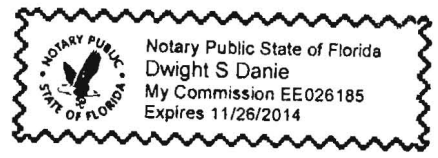
OATH OF CANDIDATE
OFFICE OF CITY OF MIAMI COMMISSIONER

Before me, an officer authorized to administer oaths, personally appeared

Richard P. Dunn II

(Please print name as you wish it to appear on ballot)

who being sworn, says, he/she is a candidate for the office of City of Miami Commissioner, District 5; that he/she is a qualified elector of the City of Miami, Florida; that he/she is qualified under the Constitution, the Laws of Florida, and City of Miami Charter to hold the office to which he/she desires to be elected; that he/she has taken the oath required by ss. 876.05 – 876.10, Florida Statutes; that he/she has qualified for no other public office in the State, the term of which office or any part thereof runs concurrent with that of the office he/she seeks; and that he/she has resigned or taken a leave of absence from any office from which he/she is required to resign or take a leave of absence, pursuant to Section 99.012, Florida Statutes.



[Signature]
Signature of Candidate

1895 N.W. 57th Street
Address

Miami, FL 33142
City State ZIP Code

The Loyalty Oath and the above Oath of Candidate are sworn to

and subscribe before me this 9 day of September, 2013.

(Signature of Officer Administering the Oath, or of designated Notary Public – State of Florida) [Signature]

Print, Type, or Stamp Commissioned Name of designated Notary Public) Dwight Danie

Personally Known OR Produced Identification Type of Identification Produced Dunn's Lore

Name: **RICHARD DUNN**
 Account Number: [REDACTED]
 Billing Date: 11/01/2012
 Past Due Date: **DO NOT PAY**

Billing Inquiries (hours 8:00 AM - 4:30 PM) 305-665-7477
 Report any hazardous conditions to 305-274-9272
 Water Conservation Program Information- Call 311

Messages

Pay your bill and view your account on-line at www.miamidade.gov/water/make-payments.asp. To pay by phone, call 1-877-565-9300 to use a banking account or 1-877-729-5590 to use a credit card.

In an effort to be more eco-friendly, WASD will now post the quarterly Pipeline newsletter at www.miamidade.gov/water/publications-reports.asp

Account Summary

Previous Balance [REDACTED]
 Payment Received [REDACTED]
 Adjustments [REDACTED]
Total Account Balance [REDACTED]

Service Address: 1895 NW 57TH ST, RES [REDACTED]



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For more information see back of bill
Miami-Dade Water and Sewer Department
 P O Box 026055
 Miami, FL 33102-6055

Account Number	Past Due Date	Amount Due (US \$)	Amount Enclosed
[REDACTED]	DO NOT PAY	[REDACTED]	Do Not Pay

- Payment in US funds must be received by the past due date to avoid discontinuance of service. A 10% late charge will be assessed if payment is not received by the past due date.
- Check box for address change. Please print changes on reverse side.
- Pay by phone or Online:
 1-877-565-9300 checking/savings
 1-877-729-5590 credit card www.miamidade.gov

RICHARD DUNN
 1895 NW 57TH ST
 MIAMI FL 33142-3055





Bill Statement



Customer Name: RICHARD DUNN II
 Service Address: 1895 NW 57TH ST
 FPL Account Number: [REDACTED]
 Service Dates: 09/07/2012 to 08/07/2013
 Statement Date: 08/12/2013
 Next Scheduled Read Date: 09/09/2013

[View Back of the Bill](#) [View Bill Insert](#)

Understanding Your Bill

[Access Another Account](#)

The e-mail address we have for this account is [REDACTED]
 Access e-mail update to make changes.

Amount of your last bill	Payments (-)	Additional activity (+ or -)	Balance before new charges (=)	New charges (+)	Total amount you owe (=)	New charges due by
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	Sep 03 2013

[Pay Online](#)

Amount of your last bill [REDACTED]
 Payment received - Thank you [REDACTED]
 Additional activity:
 Credit [REDACTED]
 Deposit balance due [REDACTED]
 Reconnection charge [REDACTED]
 Balance before new charges [REDACTED]
 New charges (Rate: RS-1 RESIDENTIAL SERVICE) [REDACTED]
 Electric service amount [REDACTED]
 Storm charge [REDACTED]
 Gross receipts tax [REDACTED]
 Franchise charge [REDACTED]
 Utility tax [REDACTED]
 Service charge [REDACTED]
 Total new charges [REDACTED]
 Total amount you owe [REDACTED]

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- Payments received after September 03, 2013 are considered late a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- This bill is for multiple (11) billing periods. Details of each period are available on the attached report(s).
- The Florida Public Service Commission approved a quarterly storm charge adjustment. The slight decrease will apply to your bill beginning Sept. 1. Visit www.FPL.com/rates to learn more about the charges on your bill.
- The Service/Initial Charge is a one-time charge to defray administrative costs required to start your electric service or to make a change to your account at your request.

Multiple-month usage
 Meter no. ACD4200

Total kWh [REDACTED]

For more help in managing your bill, if you are not already participating, access



Welcome, Richard Dunn

User ID: [REDACTED]

[Change User ID](#) | [Change Password](#)



Start your pet project and make your bill even lower
Get started >

Account Summary



Total Amount Owed ⓘ [REDACTED]
New Charges Due By
 Sep 3, 2013
 Last Payment [REDACTED]
 Date Received [REDACTED]
 Sep 4, 2013

[Pay Bill](#)
[View My Bill >](#)
Payment History >
Billing History >

Account Information
 Account Name:
 • Richard Dunn Li
 Account Number: [REDACTED]

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 CITY OF MIAMI, FL

FPL PROGRAMS
Billing Options
 • [FPL E-Mail Bill®](#)
 Discontinue

Service Address:
 • 1895 Nw 57th St
 Mailing Address: [Update](#)

• [CheckFree® & Your Local Bank](#)

[Enroll Now](#)

• 1895 Nw 57th St
 • Miami FL, 33142

Payment Options

- [FPL Automatic Bill Pay®](#)
- [FPL Pay Online](#)
- [All Payment Options](#)

[Enroll Now](#)
[Enroll Now](#)
[See Options](#)

Phone Number: [Update](#)
 • (305)635-7366

Bill Management Options

- [Payment Reminder®](#)
- [FPL Budget Billing®](#)
- [FPL Friendly Reminder®](#)
- [Payment Extension](#)

[Unsubscribe](#)
[Enroll Now](#)
[Enroll Now](#)
[Request Extension](#)

E-mail Address: [Update](#)

[Change Email Preferences](#)

Deposit Amount:

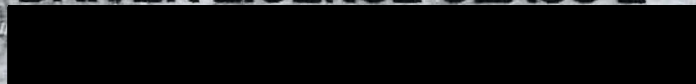
[REDACTED]

Helpful Links

- Common Causes of High Bills
- Top 10 Tips to Save Energy
- Online Home Energy Survey
- Donate to FPL Care To Share®

Florida *The Sunshine State*

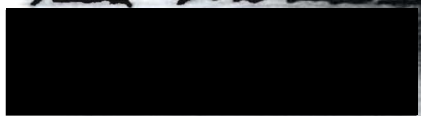
DRIVER LICENSE CLASS E



**RICHARD PAUL
DUNN JR**
1895 NW 57 ST
MIAMI, FL 33142-3055
DOB: 11-15-1960 SEX: M
ISSUED: 10-22-2011 HGT: 5-02
EXPIRES: 11-15-2019
REST: A
ENDORSE:



Richard A. Dunn Jr.



Operation of a motor vehicle constitutes consent to any sobriety test required by law.

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**MIAMI-DADE
COUNTY**

voter information Card
Miami-Dade County, FL

Tarjeta de información del elector
Condado de Miami-Dade, FL

Kat Enfòmasyon Votè
Konte Miami-Dade, FL

Richard Paul Dunn II
1895 NW 57Th St
Miami FL 33142

ISSUED
EMITIDA
ENPRIME

**Bring photo identification
when voting.**

**Para votar, presente una
identificación con fotografía.**

**Tranpri pote yon pyès idantifikasyon
ki gen foto w sou li lè w'ap vin vote.**

08/28/13

Registration No.
Núm. de inscripción
Nim. Enskripsyon

109024022

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RICHARD P DUNN CAMPAIGN FUND
1895 NW 57TH ST
MIAMI, FL 33142-3055

5533

9-32/720

DATE 9/6/13

PAY TO THE ORDER OF

City of Miami

\$ 682.00

Six hundred eighty-two

DOLLARS  Security Features Included. Details on Back.

CHASE

JPMorgan Chase Bank, N.A.
www.Chase.com

MEMO

qualifying fee

Clyde

⑆072000326⑆



City of Miami
OFFICIAL RECEIPT

No. 418338

\$ 682.⁰⁰ Sales Tax \$ — Total \$ 682.⁰⁰

Date: 09/09/13

Six hundred eighty-two and ⁰⁰/₁₀₀ /100 Dollars

Received from: Richard P. Dunn Campaign Fund / Richard P. Dunn

Address: 1895 NW 57th St., Mia, FL 33142

For: Commissioner D5
Qualifying Fee - Nov. 2013

Reference No: CK # 5533

This Receipt not VALID unless dated, filled in and signed by authorized employee of department or division designated hereon and until the City has collected the proceeds of any checks tendered as payment herein.

By: [Signature]

Department: City Clerk

Division: _____

C FN/TM 402 Rev. 03/03

Distribution: White - Customer; Canary - Finance; Pink - Issuing Department

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