



SOURCE OF INCOME STATEMENT

Disclosure for tax year ending:		BAR CODE	
First Name	Middle Name/Initial		Last Name
Mailing Address street number, street name, or P.O. Box			
City, State, Zip	Employee ID #:		

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 a: **County Employee**
 Municipal Employee of _____

Position held or sought: _____

Board where serving: _____ **Term or employment began on:** _____

Dept. where employed: _____ **Work telephone:** _____

Work address: _____

Please list below in descending order, with the largest source first, the name, address, and principal business activity of every source of your income, including public salary you received or used during the disclosure period or any person who received for your benefit. 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 aforesaid information is a true and correct statement.

Signature of person disclosing **Print name** **Date signed**

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; etc.

Filing Instructions

A "Source of Income Form," "Financial Statement," "Form 1," or a copy of the personal income tax forms may be filed to satisfy the filing requirement for County employees, municipal employees, and advisory board members.

This form must be filed by July 1st of each year.

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

Miami-Dade County Personnel and Advisory Board members shall file completed forms with:

Miami-Dade Elections Department

2700 NW 87th Avenue

Miami, FL 33172

Or

P.O. Box 521550

Miami, FL 33152-1550

**Municipal Personnel and Advisory Board Members shall file completed forms with:
Their respective Municipal Clerk.**

**For further information contact the
Miami-Dade Elections Department at 305-499-8413 or your Municipal Clerk's Office**

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.