BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re YESENIA GOMEZ	)	Financial Disclosure Appeal No. FD 21-082
	)	
Appellant.	)	Final Order No. XXX
	)	

FINAL ORDER

This matter came before the Commission on Ethics, meeting in public session on October 23, 2026, on the appeal of Appellant, pursuant to Section 112.3145(8)(g), Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)) which assesses an automatic fine of $25 per day on a person who fails to timely file a required CE Form 1, Statement of Financial Interests. The Commission may waive the fine in whole or in part for good cause shown, based on "unusual circumstances" surrounding the failure to file by the designated date. There are no matters in dispute. Appellant did not request a hearing.

Findings of Fact

1. According to information provided to the Commission, Appellant served as Procurement Contracting Associate for Miami-Dade County, a position requiring the filing of a 2020 CE Form 1, Statement of Financial Interests. In 2021, the designated due date for submitting a 2020 CE Form 1 was July 1, 2021, with a grace period ending on September 1, 2021.

2. No later than June 1, 2021, the Miami-Dade County Supervisor of Elections sent Appellant a 2020 CE Form 1. This was sent to Appellant at 3660 NE 166th St, Apt 315, Miami Beach, Fl 33160.

3. No later than August 1, 2021, the Miami-Dade County Supervisor of Elections sent Appellant a notice of delinquency by certified mail. This notice was sent to Appellant at the 3660

NE 166th St address. It appears from records provided by the Miami-Dade County Supervisor of Elections that this mail piece was marked as unclaimed and returned to the sender.

4. On September 8, 2021, the Commission on Ethics mailed Appellant a courtesy notice of fines accruing. This notice was sent to the 3660 NE 166th St address.

5. On September 14, 2021, the Miami-Dade County Supervisor of Elections Received Appellant's 2020 CE Form 1.

6. On October 26, 2023, the Commission mailed Appellant a Notice of Assessed Fine. The notice was sent by mail to 111 NW 1st Street STE 1300, Miami, Fl 33128-1924. It indicated the total of Appellant's accrued automatic fine was $325 ($25 per day for 13 days late) and provided that the Commission must receive an appeal of the fine by November 27, 2023.

7. On November 27, 2023, the Commission received Appellant's appeal of her automatic fine for Form Year 2020. In part B of her appeal form, Appellant checked "Sickness or injury," "Lack of notification," and "Other unusual circumstance" as the general reasons for her appeal. In part C of her appeal form, where an appellant is asked to provide a detailed explanation of his or her appeal, Appellant wrote that she did not receive the mailings with the Form 1 on time and that was going through anxiety and depression due to marital issues throughout 2020 that culminated in a divorce in 2021. Appellant also wrote that her mother was sick and offered records from her doctors.

Conclusions of Law

8. The Commission has jurisdiction over the subject matter of this proceeding pursuant to Section 112.3145, Florida Statutes.

9. Financial disclosure is required of public officials and employees because it enables the public to evaluate potential conflicts of interest, deters corruption, and increases public confidence in government.

10. Section 112.3145(8)(g)3., Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)(2)) states:

> Any reporting person may appeal or dispute a fine, based upon unusual circumstances surrounding the failure to file on the designated due date, and may request and is entitled to a hearing before the commission, which may waive the fine in whole or in part for good cause shown. Any such request must be in writing and received by the commission within 30 days after the notice of payment due is transmitted. In such a case, the reporting person must, within the 30-day period, notify the person designated to review the timeliness of reports in writing of his or her intention to bring the matter before the commission. For purposes of this subparagraph, the term "unusual circumstances" does not include the failure to monitor an e-mail account or failure to receive notice if the person has not notified the commission of a change in his or her e-mail address.

11. Pursuant to Rule 34-8.215(4), F.A.C., "unusual circumstances" means uncommon, rare or sudden events over which the reporting individual had no control and which directly result in the failure to act in accordance with the filing requirements. Circumstances which allow for time in which to take those steps necessary to assure compliance with the filing requirements shall be deemed not to constitute unusual circumstances.

12. Here, Appellant first states that she did not receive her Form 1 in time from the Miami-Dade County Supervisor of Elections. While the first mailing was not sent by certified mail, the second mailing that was sent by certified mail was marked as unclaimed and returned to the Miami-Dade County Supervisor of Elections. Appellant also noted that she got a divorce in 2021, and that her mother was sick. Considering Appellant's claims, and that there is no evidence

showing otherwise, there are "unusual circumstances" here that prevented the timely filing of the financial disclosure form that justify waiving the $325 fine.

Order

Based on the foregoing facts and conclusions of law, the Commission hereby finds that unusual circumstances for failure to timely file have been demonstrated. We therefore waive the assessed fine of $325.

ORDERED by the State of Florida Commission on Ethics meeting in public session on October 23, 2026.

_____
Date Rendered

_____
Jeremy M. Rodgers
Chair, Florida Commission on Ethics

THIS ORDER CONSTITUTES FINAL AGENCY ACTION. ANY PARTY WHO IS ADVERSELY AFFECTED BY THIS ORDER HAS THE RIGHT TO SEEK JUDICIAL REVIEW UNDER SECTION 120.68, AND SECTION 112.3241, FLORIDA STATUTES, BY FILING A NOTICE OF ADMINISTRATIVE APPEAL PURSUANT TO RULE 9.110 FLORIDA RULES OF APPELLATE PROCEDURE, WITH THE CLERK OF THE COMMISSION ON ETHICS, AT EITHER 325 JOHN KNOX ROAD, BUILDING E, SUITE 200, TALLAHASSEE, FLORIDA 32303 OR P.O. DRAWER 15709, TALLAHASSEE, FLORIDA 32317-5709; AND BY FILING A COPY OF THE NOTICE OF APPEAL ATTACHED TO WHICH IS A CONFORMED COPY OF THE ORDER DESIGNATED IN THE NOTICE OF APPEAL ACCOMPANIED BY THE APPLICABLE FILING FEES WITH THE APPROPRIATE DISTRICT COURT OF APPEAL. THE NOTICE OF ADMINISTRATIVE APPEAL MUST BE FILED WITHIN 30 DAYS OF THE DATE THIS ORDER IS RENDERED.

JMR: aln

Yesenia Gomez
1805 Sans Souci Blvd Apt 522
North Miami, FL 33181

21-082

287960

STATE OF FLORIDA
COMMISSION ON ETHICS

325 John Knox Road
Building E, Suite 200
Tallahassee, FL 32303
Telephone: (850) 488-7864
Fax: (850) 488-3077
Email: disclosure@leg.state.fl.us

FLORIDA
COMMISSION ON ETHICS
NOV 27 2023
RECEIVED

APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2020

DIRECTIONS: The information you provide in this form is critical for processing your appeal in a timely manner.

In Part A, please provide current contact information. If your contact information changes while your appeal is being processed, please notify us.

In Part B, please check any boxes that specify the general reason(s) for your appeal.

In Part C, please explain in detail the reason(s) for your appeal. In addition to your written explanation in Part C, you may attach any documents that support your appeal.

IMPORTANT: TO PRESERVE YOUR RIGHT TO APPEAL, THIS FORM OR OTHER WRITTEN APPEAL (AND ANY ATTACHMENTS) MUST BE FILED WITH (RECEIVED BY) THE COMMISSION ON ETHICS WITHIN THIRTY (30) DAYS OF THE DATE THE NOTICE OF ASSESSMENT OF AUTOMATIC FINE WAS MAILED TO YOU.

PLEASE SEND YOUR COMPLETED FORM TO ONE OF THE FOLLOWING:

Mailing Address: Commission on Ethics
P.O. Drawer 15709
Tallahassee, FL 32317-5709

Physical Address: Commission on Ethics
325 John Knox Road
Building E, Suite 200
Tallahassee, FL 32303

Fax: (850) 488-3077

Email: disclosure@leg.state.fl.us

PART A: YOUR INFORMATION

Name: Yesenia Gomez

Address: 1805 Sans Souci Blvd APT 522 City: N. Miami State: FL Zip: 33181

Daytime Tel.: 786-342-9062 Cell: Same

Email: Yesenag@miamidade.gov Filer ID# (if known):

Public Employer: Solid Wast Management DPT

Public Position: Purchasing Specialist (I dont work in Central procurement)

CONTINUED ON REVERSE SIDE

My new Job is located at 2525 NW 62St

PART B: GENERAL REASON(S) FOR YOUR APPEAL

Please choose any/all reasons that apply to your appeal.

I hereby appeal the Notice of Assessment of Automatic Fine on the following basis:

a. [✓] **Sickness or injury** (Explain in Part C and attach a statement from attending physician, including dates and nature of illness or injury)

b. [✓] **Lack of notification – Failure to receive notice** (Explain in Part C and provide documentation that supports your assertion that you never received certified mail delinquency notice: for example, incorrect address; misdelivered mail; change in employment; extended absence from home, etc.)

c. [ ] **Claim of timely filing of financial disclosure** (Explain in Part C and provide copy of certified mail receipt and/or copy of completed form which had been previously filed, along with a sworn notarized statement that you filed prior to the deadline)

d. [ ] **Left public position prior to December 31, 2020** (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2020)

e. [✓] **Other unusual circumstance** (Explain in Part C and provide documentation explaining uncommon, rare, or sudden occurrence that prevented timely filing prior to deadline)

f. [ ] **Not required to file** (Explain in Part C and provide documentation that supports reason for not required to file)

PART C: DETAILED EXPLANATION OF YOUR APPEAL

Please provide a detailed explanation of your appeal, including why each option you selected in Part B is applicable to you. You may use the space provided and/or attach additional pages.

I did not get it on time, I was and still ace going throug anxiety & depression. In 2020 I was having a lot of marital issues Plus 2021 we had a divoced, right now I have my mother sick, Please let me kow If I need to send papers from the Doctors'

OPTIONAL REQUEST FOR HEARING

[ ] In addition to this written appeal, I specifically request to appear before the Commission in a hearing pursuant to Section 112.3144(8)(f)3 or Section 112.3145(8)(g)3, Florida Statutes. Commission meetings occur in Tallahassee.

SIGNATURE

I have received and read the Notice of Assessment of Automatic Fine and its instructions on How to Appeal and I understand my options. I am requesting disposition of this matter as indicated.

11/23/2023
DATE

Yesenia Gomez
SIGNATURE

FD114837

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2020

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

FOR OFFICE USE ONLY:

Processed Date: 9/14/21 mB

Scanned Date: 10/4/21 RJC

Filing Status Code: _____

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Gomez Yesenia

MAILING ADDRESS :

111 NW 1st Street, Suite 1300

CITY : ZIP : COUNTY :

Miami 33128 Miami-Dade County

NAME OF AGENCY :

ISD/ Strategic Procurement Department

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Procurement Contracting Associate

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

9/14/21

****** THIS SECTION MUST BE COMPLETED ******

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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
Miami-Dade County/ISD	111 NW 1st street, Miami Fla, 33128	Procurement

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
N/A	N/A	N/A	N/A

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

N/A

N/A

N/A

N/A

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

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.

FD114837

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
N/A	N/A
N/A	N/A

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
N/A	N/A
N/A	N/A

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")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY		
ADDRESS OF BUSINESS ENTITY	N/A	
PRINCIPAL BUSINESS ACTIVITY	N/A	
POSITION HELD WITH ENTITY	N/A	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N/A	
NATURE OF MY OWNERSHIP INTEREST	N/A	

PART G — TRAINING For **elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency** created under Part III, Chapter 163 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:

Yesenia Gomez

Date Signed:

9/14/2021

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:

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers **or** ***specified state employees*** who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.

From: Gomez, Yesenia (ISD)
To: "CEFORM1@leg.state.fl.us."; Financial Disclosures (Elections)
Cc: "Green.Keyana"
Subject: RE: Form 1
Date: Tuesday, September 14, 2021 10:02:00 AM
Attachments: 2020 Statement of Financial Interest.pdf

Good morning Keyana,

I we spoke I am sending the Statement of Financial, I don't know the email you sent me it

From: Green.Keyana <GREEN.KEYANA@leg.state.fl.us>
Sent: Tuesday, September 14, 2021 9:21 AM
To: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Subject: Form 1

EMAIL RECEIVED FROM EXTERNAL SOURCE

Good Morning,

Attached is the Form 1 you've requested. You may email it back to us at CEFORM1@leg.state.fl.us. Have a great day!

Sincerely,
Keyana L. Green
Executive Secretary/Financial Disclosure
850-488-7864
Florida Commission on Ethics
Post Office Drawer 15709
Tallahassee, FL 32317-5709

FD114837

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2020

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

FOR OFFICE USE ONLY:

9/14/21
287860
PROCESSED

Processed Date: 9/15/21 mB
Scanned Date: 10/5/21
Filing Status Code:

RECEIVED
2021 SEP 15 PM 2:11
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT
9/15/21

LAST NAME -- FIRST NAME -- MIDDLE NAME :
Gomez Yesenia

MAILING ADDRESS :
111 NW 1st Street, Suite 1300

CITY : Miami
ZIP : 33128
COUNTY : Miami-Dade County

NAME OF AGENCY :
ISD/ Strategic Procurement Department

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
Procurement Contracting Associate

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

****** THIS SECTION MUST BE COMPLETED ******

DISCLOSURE PERIOD:
THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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
Miami-Dade County/ISD	111 NW 1st street, Miami Fla, 33128	Procurement

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
N/A	N/A	N/A	N/A

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

N/A
N/A
N/A
N/A

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

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
N/A	N/A
N/A	N/A

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
N/A	N/A
N/A	N/A

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")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY		
ADDRESS OF BUSINESS ENTITY	N/A	
PRINCIPAL BUSINESS ACTIVITY	N/A	
POSITION HELD WITH ENTITY	N/A	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N/A	
NATURE OF MY OWNERSHIP INTEREST	N/A	

RECEIVED
2021 SEP 15 PM 2:1
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

PART G — TRAINING For **elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency** created under Part III, Chapter 163 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:

Yeseaia Gomez

Date Signed:

9/14/2021

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:

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers **or** ***specified state employees*** who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.

FD114837

Castellanos, Ramon (Elections)

From: Prine.Emily <PRINE.EMILY@leg.state.fl.us>
Sent: Wednesday, September 15, 2021 1:57 PM
To: Castellanos, Ramon (Elections)
Cc: Financial Disclosures (Elections)
Subject: Recorded 287860
Attachments: Gomez Yesenia.pdf

Importance: High

EMAIL RECEIVED FROM EXTERNAL SOURCE

From: Gomez, Yesenia (ISD)
To: Financial Disclosures (Elections)
Subject: RE: 2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement)
Date: Monday, March 29, 2021 6:58:09 PM

Good evening,

I am not sure do I have to fill out this form, I have worked twice last year as an inspector, I am a Procurement Purchasing Associate, do I have to fill it out? Thank you!!!!

Best regards,

-----Original Message-----
From: Financial Disclosures (Elections) [mailto:FINDISCELEC@miamidade.gov]
Sent: Monday, March 29, 2021 9:21 AM
To: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Subject: 2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement)

Good morning,

As you may know, your department has flagged you as having a state financial disclosure filing requirement because you held one of these positions in local government during the 2020 tax year:

Mayor; county manager; chief administrative employee of a county; county attorney; chief county building code inspector; county water resources coordinator; county pollution control director; county environmental control director; county administrator with power to grant or deny a land development permit; chief of police; fire chief; district medical examiner; or purchasing agent (regardless of title) having the authority to make any purchase exceeding $35,000 for the local governmental unit (including final electronic signature approvals.)

We are requesting that you submit your financial disclosure form at this time to reduce the number of notifications you will receive. Per State law, we are required to collect an originally signed Form 1 Statement of Financial Interests with our office by July 1, 2021 to satisfy your financial disclosure obligation. For your convenience, the 2020 tax year Form 1 may be filled out online, http://www.ethics.state.fl.us/Documents/Forms/Form%201_2020i.pdf?cp=202115. Please send your completed, originally signed and dated financial disclosure statement via email to financial.disclosures@miamidade.gov so long as it is a legible scanned copy. If you wish to submit the completed original hardcopy via mail, you may use the address listed below:

Miami-Dade Elections Department
Attn: Financial Disclosures Section
2700 NW 87 Avenue
Miami, Florida 33172

The Elections Department is the records custodian for this form; please do not send this form to the Florida Commission on Ethics in Tallahassee. If your home address is exempt from public record and you do not want your address to be made public, you may use your office or other mailing address.

If you have any questions regarding this requirement, please contact your Departmental Personnel Representative (DPR). You may also visit our Financial Disclosure website at http://www.miamidade.gov/elections/financial-disclosures.asp.

Regards,
Carmen Bofill
Miami-Dade County Elections Department
Financial Disclosure Coordinator

Government Affairs and Media Relations Division
2700 NW 87th Avenue, Miami, Florida 33172
305-499-8413 Office
financial.disclosures@miamidade.gov

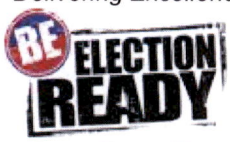
From: Financial Disclosures (Elections)
To: Gomez, Yesenia (ISD)
Cc: Financial Disclosures (Elections); Gonzalez, Cristine M. (ISD); Castellanos, Ramon (Elections)
Subject: RE: 2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement)
Date: Tuesday, March 30, 2021 9:51:42 AM
Attachments: image002.png
image003.png
image004.png

Good morning,

Please note that your department flagged you as having financial disclosure responsibility for the 2020 tax year. As such, you would need to speak to your Department Personnel Representative (DPR), copied above, and discuss the specifics as of why you were flagged. In the event the DPR notifies our office to removed you, we will be able to update our records accordingly.

Regards,

Ramon Castellanos, Records Custodian
Government Affairs and Media Relations Division
Miami-Dade County Elections Department
2700 NW 87th Avenue
Miami, Florida 33172
Office 305-499-8541
http://www.miamidade.gov/elections
"Delivering Excellence Every Day"





Miami-Dade County is a public entity subject to Chapter 119 of the Florida Statutes concerning public records. Email messages are covered under such laws and thus subject to disclosure.

-----Original Message-----
From: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Sent: Monday, March 29, 2021 6:58 PM
To: Financial Disclosures (Elections) <FINDISCELEC@miamidade.gov>
Subject: RE: 2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement)

Good evening,

I am not sure do I have to fill out this form, I have worked twice last year as an inspector, I am a Procurement Purchasing Associate, do I have to fill it out? Thank you!!!!

Best regards,

-----Original Message-----
From: Financial Disclosures (Elections) [mailto:FINDISCELEC@miamidade.gov]
Sent: Monday, March 29, 2021 9:21 AM
To: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Subject: 2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement)

Good morning,

As you may know, your department has flagged you as having a state financial disclosure filing requirement because you held one of these positions in local government during the 2020 tax year:

Mayor; county manager; chief administrative employee of a county; county attorney; chief county building code inspector; county water resources coordinator; county pollution control director; county environmental control director; county administrator with power to grant or deny a land development permit; chief of police; fire chief; district medical examiner; or purchasing agent (regardless of title) having the authority to make any purchase exceeding $35,000 for the local governmental unit (including final electronic signature approvals.)

We are requesting that you submit your financial disclosure form at this time to reduce the number of notifications you will receive. Per State law, we are required to collect an originally signed Form 1 Statement of Financial Interests with our office by July 1, 2021 to satisfy your financial disclosure obligation. For your convenience, the 2020 tax year Form 1 may be filled out online, http://www.ethics.state.fl.us/Documents/Forms/Form%201_2020i.pdf?cp=202115. Please send your completed, originally signed and dated financial disclosure statement via email to financial.disclosures@miamidade.gov so long as it is a legible scanned copy. If you wish to submit the completed original hardcopy via mail, you may use the address listed below:

Miami-Dade Elections Department
Attn: Financial Disclosures Section
2700 NW 87 Avenue
Miami, Florida 33172

The Elections Department is the records custodian for this form; please do not send this form to the Florida Commission on Ethics in Tallahassee. If your home address is exempt from public record and you do not want your address to be made public, you may use your office or other mailing address.

If you have any questions regarding this requirement, please contact your Departmental Personnel Representative (DPR). You may also visit our Financial Disclosure website at http://www.miamidade.gov/elections/financial-disclosures.asp.

Regards,
Carmen Bofill
Miami-Dade County Elections Department
Financial Disclosure Coordinator

Government Affairs and Media Relations Division
2700 NW 87th Avenue, Miami, Florida 33172
305-499-8413 Office
financial.disclosures@miamidade.gov

Florida Commission on Ethics
Financial Disclosure Notification System
Delinquency Certification (2021)

I Christina White, the Supervisor of Elections of Miami-Dade County, hereby certify that each person whose ID number, name, agency, and position appears above or on the attached list:

(1) was sent a notice of the July 1, 2021 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2021;

(2) was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2021;

(3) was sent a delinquency notice by certified mail not later than August 1, 2021 advising him or her of the grace period in effect until September 1, 2021; and of the penalties that could be imposed as provided in Section 112.3145(8)(c), Florida Statutes; and

(4) did not file a Form 1, Statement of Financial Interests, until the date shown or, had not filed a Form 1, Statement of Financial Interests by October 31, 2021; and further

(5) that the date of filing shown is based upon the earliest of the following:
(a) when the Form 1 was actually received by my office;
(b) when the Form 1 was postmarked;
(c) when the certificate of mailing (if any) was dated; or
(d) when the receipt (if any) from an established courier company was dated.

Signed _____
SUPERVISOR OF ELECTIONS

54	09/14/2021	287860	Yesenia Gomez	Miami-Dade County	Internal Services		23	Miami-Dade

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status
2020	GOMEZ YESENIA	FD114837	00162065	Filed-Filed

Mailing Activity

Mail Date	Address Mailed to	Correspondence	Certified	Delivered	Tracking#
05/28/2021	3660 NE 166 ST APT #315, NORTH MIAMI BEACH, FL 33160	FIRST FINANCIAL DISCLOSURE MAILING	N	Y	
07/29/2021	3660 NE 166 ST APT #315, NORTH MIAMI BEACH, FL 33160	SECOND FINANCIAL DISCLOSURE MAILING	Y	Y	94148149022668493 48961

Email Activty

Email Date	Email Subject	Email Address
3/29/2021 9:21:26 AM	2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement)	YESENIA.GOMEZ@MIAMIDADE.GOV

Filing Activity

Form Name	Filed Date	Valid	Comments	County	Date Filed in County
Form 1	09/14/2021	Y		MIAMI-DADE	
Form 1	09/14/2021	Y		MIAMI-DADE	

Communication

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status

Type	Date	Comments
Email	03/30/2021	From: Financial Disclosures (Elections) <FINDISCELEC@miamidade.gov> Sent: Tuesday, March 30, 2021 9:52 AM To: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov> Cc: Financial Disclosures (Elections) <FINDISCELEC@miamidade.gov>; Gonzalez, Cristine M. (ISD) <Cristine.Gonzalez@miamidade.gov>; Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov> Subject: RE: 2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement) Good morning, Please note that your department flagged you as having financial disclosure responsibility for the 2020 tax year. As such, you would need to speak to your Department Personnel Representative (DPR), copied above, and discuss the specifics as of why you were flagged. In the event the DPR notifies our office to removed you, we will be able to update our records accordingly. Regards, Ramon Castellanos, Records Custodian Government Affairs and Media Relations Division Miami-Dade County Elections Department 2700 NW 87th Avenue Miami, Florida 33172 Office 305-499-8541 http://www.miamidade.gov/elections "Delivering Excellence Every Day"

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status

Email 03/29/2021

-----Original Message-----
From: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Sent: Monday, March 29, 2021 6:58 PM
To: Financial Disclosures (Elections) <FINDISCELEC@miamidade.gov>
Subject: RE: 2020 Tax Year Financial Disclosure Filing Requirement (Employees with a State Filing Requirement)

Good evening,

I am not sure do I have to fill out this form, I have worked twice last year as an inspector, I am a Procurement Purchasing Associate, do I have to fill it out? Thank you!!!!

Best regards,

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status

Email 09/14/2021

From: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Sent: Tuesday, September 14, 2021 10:02 AM
To: 'CEFORM1@leg.state.fl.us.' <CEFORM1@leg.state.fl.us.>; Financial Disclosures (Elections) <FINDISCELEC@miamidade.gov>
Cc: 'Green.Keyana' <GREEN.KEYANA@leg.state.fl.us>
Subject: RE: Form 1

Good morning Keyana,

I we spoke I am sending the Statement of Financial, I don't know the email you sent me it

From: Green.Keyana <GREEN.KEYANA@leg.state.fl.us>
Sent: Tuesday, September 14, 2021 9:21 AM
To: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Subject: Form 1

EMAIL RECEIVED FROM EXTERNAL SOURCE

Good Morning,

Attached is the Form 1 you've requested. You may email it back to us at CEFORM1@leg.state.fl.us.
Have a great day!

Sincerely,
Keyana L. Green
Executive Secretary/Financial Disclosure
850-488-7864
Florida Commission on Ethics
Post Office Drawer 15709
Tallahassee, FL 32317-5709

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status
Email	09/15/2021	From: Prine.Emily <PRINE.EMILY@leg.state.fl.us> Sent: Wednesday, September 15, 2021 1:57 PM To: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov> Cc: Financial Disclosures (Elections) <FINDISCELEC@miamidade.gov> Subject: Recorded 287860 Importance: High		

Elections
Supervisor of Elections Financial Disclosure Section
PO Box 521550
Miami Florida 33152-1550
ADDRESS SERVICE REQUESTED

IMPORTANT:
YOUR ANNUAL DISCLOSURE FORM IS ENCLOSED
AND MUST BE FILED BY JULY1, 2021



YESENIA GOMEZ
3660 NE 166 ST APT #315
NORTH MIAMI BEACH, FL 33160

Memorandum

MIAMI-DADE COUNTY

To: Local Officer

From: Christina White
Supervisor of Elections

Subject: State Financial Disclosure Filing Requirement for the 2020 Tax Year

---

The position you held in 2020 was determined to be one that requires the filing of a financial disclosure form. According to Florida Statute 112.3145, the enclosed **Form 1, Statement of Financial Interests (2020,)** must be filed with the Elections Department by **Thursday, July 1, 2021** to satisfy your financial disclosure filing requirement for the 2020 tax year.

Persons serving as of December 31, 2020 are required to file this year. If you left the position in 2020, you are required to file a Form 1F covering the portion of 2020 you served. If you left the position in 2021, you are required to file a Form 1 for 2020 and a Form 1F for the portion of 2021 you served. See the Form 1 instructions for more information, and additional forms may be downloaded on the Elections Department website at https://www8.miamidade.gov/global/service.page?Mduid_service=ser1513200320703181.

The Elections Department is the records custodian for these forms. **Please do not file this form with the Florida Commission on Ethics in Tallahassee.** As such, kindly send your **completed and signed** financial disclosure form via email to financial.disclosures@miamidade.gov so long as it is a legible scanned copy, or by returning it to the Miami-Dade County Supervisor of Elections, Financial Disclosure Section, PO Box 521550, Miami, Florida 33152-1550. A business reply envelope has been provided for your convenience.

Please note the following:

- You can check receipt of your financial disclosure form on the Miami-Dade Elections Department website at https://www8.miamidade.gov/global/service.page?Mduid_service=ser1513200320703181.
- Persons who fail to file the annual disclosure form by September 1 are subject to automatic fines of $25 for each late day. In addition, by law, the Commission on Ethics must initiate investigations of delinquent filers in certain circumstances. This can result in your being removed from your public office or employment. See Section 112.3145(8)(c), Florida Statutes.
- If your home address is exempt from public records, please provide your office or other address.

Instructions for completing this form are included. Additional questions on how to complete this form should be directed to the Florida Commission on Ethics at 800-262-8824. If you have questions regarding the distribution or collection of this form, please contact Maria Boucourt, Miami-Dade Financial Disclosure Coordinator, at 305-499-8413 or via email at financial.disclosures@miamidade.gov.

If you think you have received this notification in error, please contact the coordinator for your agency who has provided your name based on your official position and responsibilities. If appropriate, the local agency's coordinator will contact the Florida Commission on Ethics to remove your name from the list. To find your coordinator, you can contact Ms. Boucourt at the number above or view the coordinator list provided on the Commission on Ethics' website at http://www.ethics.state.fl.us.

Enclosures

FD114837

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2020

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :
GOMEZ, YESENIA

MAILING ADDRESS :
3660 NE 166 ST APT #315

CITY : **NORTH MIAMI BEACH, FL** ZIP : **33160** COUNTY : **MIAMI–DADE**

NAME OF AGENCY :
MIAMI–DADE COUNTY – INTERNAL SERVICES

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
PROCUREMENT CONTRACTING ASSC

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

FD114837

****** THIS SECTION MUST BE COMPLETED ******

DISCLOSURE PERIOD:
THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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

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

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

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

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.

(Continued on reverse side)

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

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
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		

PART G — TRAINING For **elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency** created under Part III, Chapter 163 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:

_____

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:

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.

NOTICE

Annual Statements of Financial Interests are due July 1. If the annual form is not filed or postmarked by September 1, an automatic fine of $25 for each day late will be imposed, up to a maximum penalty of $1,500. Failure to file also can result in removal from public office or employment. [s. 112.3145, F.S.]

In addition, failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding $10,000. [s. 112.317, F.S.]

WHO MUST FILE FORM 1:

1) Elected public officials not serving in a political subdivision of the state and any person appointed to fill a vacancy in such office, unless required to file full disclosure on Form 6.

2) Appointed members of each board, commission, authority, or council having statewide jurisdiction, excluding members of solely advisory bodies, but including judicial nominating commission members; Directors of Enterprise Florida, Scripps Florida Funding Corporation, and Career Source Florida; and members of the Council on the Social Status of Black Men and Boys; the Executive Director, Governors, and senior managers of Citizens Property Insurance Corporation; Governors and senior managers of Florida Workers' Compensation Joint Underwriting Association; board members of the Northeast Fla. Regional Transportation Commission; board members of Triumph Gulf Coast, Inc; board members of Florida Is For Veterans, Inc.; and members of the Technology Advisory Council within the Agency for State Technology.

3) The Commissioner of Education, members of the State Board of Education, the Board of Governors, the local Boards of Trustees and Presidents of state universities, and the Florida Prepaid College Board.

4) Persons elected to office in any political subdivision (such as municipalities, counties, and special districts) and any person appointed to fill a vacancy in such office, unless required to file Form 6.

5) Appointed members of the following boards, councils, commissions, authorities, or other bodies of county, municipality, school district, independent special district, or other political subdivision: the governing body of the subdivision; community college or junior college district boards of trustees; boards having the power to enforce local code provisions; boards of adjustment; community redevelopment agencies; planning or zoning boards having the power to recommend, create, or modify land planning or zoning within a political subdivision, except for citizen advisory committees, technical coordinating committees, and similar groups who only have the power to make recommendations to planning or zoning boards, and except for representatives of a military installation acting on behalf of all military installations within that jurisdiction; pension or retirement boards empowered to invest pension or retirement funds or determine entitlement to or amount of pensions or other retirement benefits, and the Pinellas County Construction Licensing Board.

6) Any appointed member of a local government board who is required to file a statement of financial interests by the appointing authority or the enabling legislation, ordinance, or resolution creating the board.

7) Persons holding any of these positions in local government: mayor; county or city manager; chief administrative employee or finance director of a county, municipality, or other political subdivision; county or municipal attorney; chief county or municipal building inspector; county or municipal water resources coordinator; county or municipal pollution control director; county or municipal environmental control director; county or municipal administrator with power to grant or deny a land development permit; chief of police; fire chief; municipal clerk; appointed district school superintendent; community college president; district medical examiner; purchasing agent (regardless of title) having the authority to make any purchase exceeding $35,000 for the local governmental unit.

8) Officers and employees of entities serving as chief administrative officer of a political subdivision.

9) Members of governing boards of charter schools operated by a city or other public entity.

10) Employees in the office of the Governor or of a Cabinet member who are exempt from the Career Service System, excluding secretarial, clerical, and similar positions.

11) The following positions in each state department, commission, board, or council: Secretary, Assistant or Deputy Secretary, Executive Director, Assistant or Deputy Executive Director, and anyone having the power normally conferred upon such persons, regardless of title.

12) The following positions in each state department or division: Director, Assistant or Deputy Director, Bureau Chief, and any person having the power normally conferred upon such persons, regardless of title.

13) Assistant State Attorneys, Assistant Public Defenders, criminal conflict and civil regional counsel, and assistant criminal conflict and civil regional counsel, Public Counsel, full-time state employees serving as counsel or assistant counsel to a state agency, administrative law judges, and hearing officers.

14) The Superintendent or Director of a state mental health institute established for training and research in the mental health field, or any major state institution or facility established for corrections, training, treatment, or rehabilitation.

15) State agency Business Managers, Finance and Accounting Directors, Personnel Officers, Grant Coordinators, and purchasing agents (regardless of title) with power to make a purchase exceeding $35,000.

16) The following positions in legislative branch agencies: each employee (other than those employed in maintenance, clerical, secretarial, or similar positions and legislative assistants exempted by the presiding officer of their house); and each employee of the Commission on Ethics.

INSTRUCTIONS FOR COMPLETING FORM 1:

INTRODUCTORY INFORMATION (Top of Form): If your name, mailing address, public agency, and position are already printed on the form, you do not need to provide this information unless it should be changed. To change any of this information, write the correct information on the form, and contact your agency's financial disclosure coordinator. You can find your coordinator on the Commission on Ethics website: www.ethics.state.fl.us.

NAME OF AGENCY: The name of the governmental unit which you serve or served, by which you are or were employed, or for which you are a candidate.

DISCLOSURE PERIOD: The "disclosure period" for your report is the calendar year ending December 31, 2020.

OFFICE OR POSITION HELD OR SOUGHT: The title of the office or position you hold, are seeking, or held during the disclosure period even if you have since left that position. If you are a candidate for office or are a new employee or appointee, check the appropriate box.

PUBLIC RECORD: The disclosure form and everything attached to it is a public record. Your Social Security Number is not required and you should redact it from any documents you file. If you are an active or former officer or employee listed in Section 119.071, F.S., whose home address is exempt from disclosure, the Commission will maintain that confidentiality if you submit a written request.

MANNER OF CALCULATING REPORTABLE INTEREST

Filers have the option of reporting based on either thresholds that are comparative (usually, based on percentage values) or thresholds that are based on absolute dollar values. The instructions on the following pages specifically describe the different thresholds. Check the box that reflects the choice you have made. You must use the type of threshold you have chosen for each part of the form. In other words, if you choose to report based on absolute dollar value thresholds, you cannot use a percentage threshold on any part of the form.

IF YOU HAVE CHOSEN DOLLAR VALUE THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s). The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded $2,500 of gross income received by you in your own name or by any other person for your use or benefit.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

Examples:

— If you were employed by a company that manufactures computers and received more than $2,500, list the name of the company, its address, and its principal business activity (computer manufacturing).

— If you were a partner in a law firm and your distributive share of partnership gross income exceeded $2,500, list the name of the firm, its address, and its principal business activity (practice of law).

— If you were the sole proprietor of a retail gift business and your gross income from the business exceeded $2,500, list the name of the business, its address, and its principal business activity (retail gift sales).

— If you received income from investments in stocks and bonds, list each individual company from which you derived more than $2,500. Do not aggregate all of your investment income.

— If more than $2,500 of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than $2,500 of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A "Primary Sources of Income," if it meets the reporting threshold. You will not have anything to report unless, during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); ***and,***

(2) You received more than $5,000 of your gross income during the disclosure period from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than $5,000. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the above thresholds. List each tenant of the mall that provided more than 10% of the partnership's gross income and the tenant's address and principal business activity.

PART C — REAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than $10,000 and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CDs and savings accounts with the same bank. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number found on the lease document).

PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed more than $10,000 at any time during the disclosure period. The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. You are not required to list the amount of any debt. You do not have to disclose credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, then it is not a contingent liability.

PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145(6), F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with the types of businesses listed above. You must make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

IF YOU HAVE CHOSEN COMPARATIVE (PERCENTAGE) THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s), but income from these public sources should be included when calculating your gross income for the disclosure period. The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should include all of that income when calculating your gross income and disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded 5% of the gross income received by you in your own name or by any other person for your benefit or use during the disclosure period.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

Examples:

— If you were employed by a company that manufactures computers and received more than 5% of your gross income from the company, list the name of the company, its address, and its principal business activity (computer manufacturing).

— If you were a partner in a law firm and your distributive share of partnership gross income exceeded 5% of your gross income, then list the name of the firm, its address, and its principal business activity (practice of law).

— If you were the sole proprietor of a retail gift business and your gross income from the business exceeded 5% of your total gross income, list the name of the business, its address, and its principal business activity (retail gift sales).

— If you received income from investments in stocks and bonds, list each individual company from which you derived more than 5% of your gross income. Do not aggregate all of your investment income.

— If more than 5% of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address, and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than 5% of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A, "Primary Sources of Income," if it meets the reporting threshold. You will ***not*** have anything to report ***unless*** during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); ***and,***

(2) You received more than 10% of your gross income from that business entity; ***and,***

(3) You received more than $1,500 in gross income from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than 10% of your gross income—an amount that was more than $1,500. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the thresholds listed above. You should list each tenant of the mall that provided more than 10% of the partnership's gross income, and the tenant's address and principal business activity.

PART C — REAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes, if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than 10% of your total assets, and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CD's and savings accounts with the same bank.

Calculations: To determine whether the intangible property exceeds 10% of your total assets, total the fair market value of all of your assets (including real property, intangible property, and tangible personal property such as jewelry, furniture, etc.). When making this calculation, do not subtract any liabilities (debts) that may relate to the property. Multiply the total figure by 10% to arrive at the disclosure threshold. List only the intangibles that exceed this threshold amount. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number which can be found on the lease document). Property that is only jointly owned property should be valued according to the percentage of your joint ownership. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. None of your calculations or the value of the property have to be disclosed on the form.

Example: You own 50% of the stock of a small corporation that is worth $100,000, the estimated fair market value of your home and other property (bank accounts, automobile, furniture, etc.) is $200,000. As your total assets are worth $250,000, you must disclose intangibles worth over $25,000. Since the value of the stock exceeds this threshold, you should list "stock" and the name of the corporation. If your accounts with a particular bank exceed $25,000, you should list "bank accounts" and bank's name.

PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed any amount that, at any time during the disclosure period, exceeded your net worth. You are not required to list the amount of any debt or your net worth. You do not have to disclose: credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, it is not a contingent liability.

Calculations: To determine whether the debt exceeds your net worth, total all of your liabilities (including promissory notes, mortgages, credit card debts, judgments against you, etc.). The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. Subtract the sum total of your liabilities from the value of all your assets as calculated above for Part D. This is your "net worth." List each creditor to whom your debt exceeded this amount unless it is one of the types of indebtedness listed in the paragraph above (credit card and retail installment accounts, etc.). Joint liabilities with others for which you are "jointly and severally liable," meaning that you may be liable for either your part or the whole of the obligation, should be included in your calculations at 100% of the amount owed.

Example: You owe $15,000 to a bank for student loans, $5,000 for credit card debts, and $60,000 (with spouse) to a savings and loan for a home mortgage. Your home (owned by you and your spouse) is worth $80,000 and your other property is worth $20,000. Since your net worth is $20,000 ($100,000 minus $80,000), you must report only the name and address of the savings and loan.

PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145, F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with, the types of businesses listed above. You are required to make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

. . . IMPORTANT . . . IMPORTANT . . . IMPORTANT . . .

Form 1 Filers

FORMS ARE DUE JULY 1

Filing late may result in automatic fines of $25 per day!
Failure to pay fines may result in salary withholding, wage garnishment, or removal from office or employment!

* * *

Read the Instructions

The Commission does not review forms for accuracy, and a complaint can be filed against you for failing to properly make a required disclosure.

* * *

Manner of Calculating Reportable Interest

You have 2 options – Comparative (Percentage) Threshold or Dollar Value Threshold.
The instructions describe each option in detail.
You must choose one and check the box that reflects your choice.

* * *

Elected Municipal Officers

Elected municipal officers and commissioners of a community redevelopment agency (created under Part III, Chapter 163) are required to complete 4 hours of ethics training each calendar year. Compliance with the training requirement must be reported on the Form 1. Elected members of a special district are not municipal officers subject to the training requirement. Report your compliance for the form year by checking the box in Part G. For more ethics training information, visit the training page on the Commission's website.

* * *

Your Disclosure is a Public Record

Do NOT put social security, bank account or credit card numbers on your Form 1.
If your home address or other information is exempt from disclosure under Section 119.071, F.S., and you want us to keep it confidential, you must submit a written request as required by Section 119.071. If you previously filed a confidentiality request with our office, you do not need to file another request this year.



Questions?

Visit our website: www.ethics.state.fl.us

Under the "Financial Disclosure" tab you can find information about your specific filing requirement, coordinator contact information, where to file, and the ability to confirm that your form has been received (please allow five business days from the date you mailed the form). Helpful general information and summaries of the Commission's most significant opinions dealing with financial disclosure can also be found here.

Contact us!

(850) 488-7864 or email: disclosure@leg.state.fl.us

Elections
Supervisor of Elections Financial Disclosure Section
PO Box 521550
Miami Florida 33152-1550
ADDRESS SERVICE REQUESTED

IMPORTANT:
YOUR ANNUAL DISCLOSURE FORM IS ENCLOSED AND MUST BE FILED BY SEPT. 1, 2021

USPS CERTIFIED MAIL



9414 8149 0226 6849 3489 61



FD114837

YESENIA GOMEZ
3660 NE 166TH ST APT 315
NORTH MIAMI BEACH, FL 33160

Memorandum

MIAMI-DADE COUNTY

To: Local Officer

From: Christina White
Supervisor of Elections

Subject: Notice of Delinquency - Financial Disclosure Filing Requirement for the 2020 Tax Year

---

The position you held in 2020 was determined to be one that requires the filing of a financial disclosure form. Our records indicate that you were mailed a financial disclosure notice at the end of May, advising you that per Florida Statute 112.3145, you were required to file a Form 1, Statement of Financial Interests with our office by July 1, 2021. To date, we have not received the required form from you.

Pursuant to State law, I am writing to notify you that although you are delinquent in filing your financial disclosure form with our office, **a grace period is in effect until Wednesday, September 1, 2021 to file your signed and dated Form 1 for the 2020 tax year with our office.**

If your Form 1 is not received by September 1, 2021, a fine of $25 for each day late will be imposed, up to a maximum penalty of $1,500. In addition, I will be required by law to notify the State of Florida Commission on Ethics of the delinquency. In addition, pursuant to enacted legislation, the Commission on Ethics must initiate investigations of delinquent filers, in certain circumstances. This can result in your removal from public office or employment. See Section 112.3145(8)(c), Florida Statues.

Please note that persons serving as of December 31, 2020 are required to file this year. If you left the position in 2020, you are required to file a Form 1F 2020 covering the portion of 2020 you served. If you left the position in 2021, you are required to file a Form 1 for 2020 and a Form 1F 2021 for the portion of 2021 you served. Also, if your home address is exempt from public records, please provide your office address or other mailing address. Instructions for completing this form are included and additional questions on how to complete this form should be directed to the State of Florida Commission on Ethics at 850-488-7864.

The Elections Department is the records custodian for these forms. As such, please send your **completed, signed and dated financial disclosure statement** via email to financial.disclosures@miamidade.gov so long as it is a legible scanned copy, or by returning it to the Miami-Dade County Supervisor of Elections, Financial Disclosure Section, PO Box 521550, Miami, Florida 33152. A business reply envelope has been provided for your convenience. The form may also be hand delivered. **Please do not file this form with the Florida Commission on Ethics in Tallahassee.** If you filed directly with the Florida Commission on Ethics, please provide us a copy.

You can check receipt of your financial disclosure form on the Miami-Dade Elections Department website at www.miamidade.gov/elections/disclosure. In the event that you already filed your financial disclosure form with the Miami-Dade County Elections Department, please contact our office immediately so that we may review our records and remove your name from the delinquency list, if applicable.

If you have any questions or need additional information, please contact Maria Boucourt, Miami-Dade Financial Disclosure Coordinator, at 305-499-8413 or via email at financial.disclosures@miamidade.gov.

If you think you have received this in error, please contact the coordinator for your agency who has provided your name based on your official position and responsibilities. If appropriate, the local agency's coordinator will contact the Florida Commission on Ethics to remove your name from the list. To find your coordinator, you can contact Maria Boucourt at the number above or view the coordinator list provided on the Commission on Ethics' website at http://www.ethics.state.fl.us.

Enclosures

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2020

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

GOMEZ, YESENIA

MAILING ADDRESS :

3660 NE 166TH ST APT 315

CITY : ZIP : COUNTY :

NORTH MIAMI BEACH, FL 33160

NAME OF AGENCY :

MIAMI–DADE COUNTY – INTERNAL SERVICES

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

PROCUREMENT CONTRACTING ASSC

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

FD114837

****** THIS SECTION MUST BE COMPLETED ******

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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

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

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

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

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

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
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		

PART G — TRAINING For **elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency** created under Part III, Chapter 163 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:

_____

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:

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers **or** ***specified state employees*** who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.

NOTICE

Annual Statements of Financial Interests are due July 1. If the annual form is not filed or postmarked by September 1, an automatic fine of $25 for each day late will be imposed, up to a maximum penalty of $1,500. Failure to file also can result in removal from public office or employment. [s. 112.3145, F.S.]

In addition, failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding $10,000. [s. 112.317, F.S.]

WHO MUST FILE FORM 1:

1) Elected public officials not serving in a political subdivision of the state and any person appointed to fill a vacancy in such office, unless required to file full disclosure on Form 6.

2) Appointed members of each board, commission, authority, or council having statewide jurisdiction, excluding members of solely advisory bodies, but including judicial nominating commission members; Directors of Enterprise Florida, Scripps Florida Funding Corporation, and Career Source Florida; and members of the Council on the Social Status of Black Men and Boys; the Executive Director, Governors, and senior managers of Citizens Property Insurance Corporation; Governors and senior managers of Florida Workers' Compensation Joint Underwriting Association; board members of the Northeast Fla. Regional Transportation Commission; board members of Triumph Gulf Coast, Inc; board members of Florida Is For Veterans, Inc.; and members of the Technology Advisory Council within the Agency for State Technology.

3) The Commissioner of Education, members of the State Board of Education, the Board of Governors, the local Boards of Trustees and Presidents of state universities, and the Florida Prepaid College Board.

4) Persons elected to office in any political subdivision (such as municipalities, counties, and special districts) and any person appointed to fill a vacancy in such office, unless required to file Form 6.

5) Appointed members of the following boards, councils, commissions, authorities, or other bodies of county, municipality, school district, independent special district, or other political subdivision: the governing body of the subdivision; community college or junior college district boards of trustees; boards having the power to enforce local code provisions; boards of adjustment; community redevelopment agencies; planning or zoning boards having the power to recommend, create, or modify land planning or zoning within a political subdivision, except for citizen advisory committees, technical coordinating committees, and similar groups who only have the power to make recommendations to planning or zoning boards, and except for representatives of a military installation acting on behalf of all military installations within that jurisdiction; pension or retirement boards empowered to invest pension or retirement funds or determine entitlement to or amount of pensions or other retirement benefits, and the Pinellas County Construction Licensing Board.

6) Any appointed member of a local government board who is required to file a statement of financial interests by the appointing authority or the enabling legislation, ordinance, or resolution creating the board.

7) Persons holding any of these positions in local government: mayor; county or city manager; chief administrative employee or finance director of a county, municipality, or other political subdivision; county or municipal attorney; chief county or municipal building inspector; county or municipal water resources coordinator; county or municipal pollution control director; county or municipal environmental control director; county or municipal administrator with power to grant or deny a land development permit; chief of police; fire chief; municipal clerk; appointed district school superintendent; community college president; district medical examiner; purchasing agent (regardless of title) having the authority to make any purchase exceeding $35,000 for the local governmental unit.

8) Officers and employees of entities serving as chief administrative officer of a political subdivision.

9) Members of governing boards of charter schools operated by a city or other public entity.

10) Employees in the office of the Governor or of a Cabinet member who are exempt from the Career Service System, excluding secretarial, clerical, and similar positions.

11) The following positions in each state department, commission, board, or council: Secretary, Assistant or Deputy Secretary, Executive Director, Assistant or Deputy Executive Director, and anyone having the power normally conferred upon such persons, regardless of title.

12) The following positions in each state department or division: Director, Assistant or Deputy Director, Bureau Chief, and any person having the power normally conferred upon such persons, regardless of title.

13) Assistant State Attorneys, Assistant Public Defenders, criminal conflict and civil regional counsel, and assistant criminal conflict and civil regional counsel, Public Counsel, full-time state employees serving as counsel or assistant counsel to a state agency, administrative law judges, and hearing officers.

14) The Superintendent or Director of a state mental health institute established for training and research in the mental health field, or any major state institution or facility established for corrections, training, treatment, or rehabilitation.

15) State agency Business Managers, Finance and Accounting Directors, Personnel Officers, Grant Coordinators, and purchasing agents (regardless of title) with power to make a purchase exceeding $35,000.

16) The following positions in legislative branch agencies: each employee (other than those employed in maintenance, clerical, secretarial, or similar positions and legislative assistants exempted by the presiding officer of their house); and each employee of the Commission on Ethics.

INSTRUCTIONS FOR COMPLETING FORM 1:

INTRODUCTORY INFORMATION (Top of Form): If your name, mailing address, public agency, and position are already printed on the form, you do not need to provide this information unless it should be changed. To change any of this information, write the correct information on the form, and contact your agency's financial disclosure coordinator. You can find your coordinator on the Commission on Ethics website: www.ethics.state.fl.us.

NAME OF AGENCY: The name of the governmental unit which you serve or served, by which you are or were employed, or for which you are a candidate.

DISCLOSURE PERIOD: The "disclosure period" for your report is the calendar year ending December 31, 2020.

OFFICE OR POSITION HELD OR SOUGHT: The title of the office or position you hold, are seeking, or held during the disclosure period even if you have since left that position. If you are a candidate for office or are a new employee or appointee, check the appropriate box.

PUBLIC RECORD: The disclosure form and everything attached to it is a public record. Your Social Security Number is not required and you should redact it from any documents you file. If you are an active or former officer or employee listed in Section 119.071, F.S., whose home address is exempt from disclosure, the Commission will maintain that confidentiality if you submit a written request.

MANNER OF CALCULATING REPORTABLE INTEREST

Filers have the option of reporting based on either thresholds that are comparative (usually, based on percentage values) or thresholds that are based on absolute dollar values. The instructions on the following pages specifically describe the different thresholds. Check the box that reflects the choice you have made. You must use the type of threshold you have chosen for each part of the form. In other words, if you choose to report based on absolute dollar value thresholds, you cannot use a percentage threshold on any part of the form.

IF YOU HAVE CHOSEN DOLLAR VALUE THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s). The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded $2,500 of gross income received by you in your own name or by any other person for your use or benefit.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

Examples:

— If you were employed by a company that manufactures computers and received more than $2,500, list the name of the company, its address, and its principal business activity (computer manufacturing).

— If you were a partner in a law firm and your distributive share of partnership gross income exceeded $2,500, list the name of the firm, its address, and its principal business activity (practice of law).

— If you were the sole proprietor of a retail gift business and your gross income from the business exceeded $2,500, list the name of the business, its address, and its principal business activity (retail gift sales).

— If you received income from investments in stocks and bonds, list each individual company from which you derived more than $2,500. Do not aggregate all of your investment income.

— If more than $2,500 of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than $2,500 of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A "Primary Sources of Income," if it meets the reporting threshold. You will not have anything to report unless, during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); ***and,***

(2) You received more than $5,000 of your gross income during the disclosure period from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than $5,000. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the above thresholds. List each tenant of the mall that provided more than 10% of the partnership's gross income and the tenant's address and principal business activity.

PART C — REAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than $10,000 and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CDs and savings accounts with the same bank. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number found on the lease document).

PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed more than $10,000 at any time during the disclosure period. The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. You are not required to list the amount of any debt. You do not have to disclose credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, then it is not a contingent liability.

PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145(6), F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with the types of businesses listed above. You must make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

IF YOU HAVE CHOSEN COMPARATIVE (PERCENTAGE) THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s), but income from these public sources should be included when calculating your gross income for the disclosure period. The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should include all of that income when calculating your gross income and disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded 5% of the gross income received by you in your own name or by any other person for your benefit or use during the disclosure period.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

Examples:

— If you were employed by a company that manufactures computers and received more than 5% of your gross income from the company, list the name of the company, its address, and its principal business activity (computer manufacturing).

— If you were a partner in a law firm and your distributive share of partnership gross income exceeded 5% of your gross income, then list the name of the firm, its address, and its principal business activity (practice of law).

— If you were the sole proprietor of a retail gift business and your gross income from the business exceeded 5% of your total gross income, list the name of the business, its address, and its principal business activity (retail gift sales).

— If you received income from investments in stocks and bonds, list each individual company from which you derived more than 5% of your gross income. Do not aggregate all of your investment income.

— If more than 5% of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address, and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than 5% of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A, "Primary Sources of Income," if it meets the reporting threshold. You will ***not*** have anything to report ***unless*** during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); ***and,***

(2) You received more than 10% of your gross income from that business entity; ***and,***

(3) You received more than $1,500 in gross income from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than 10% of your gross income—an amount that was more than $1,500. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the thresholds listed above. You should list each tenant of the mall that provided more than 10% of the partnership's gross income, and the tenant's address and principal business activity.

PART C — REAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes, if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than 10% of your total assets, and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CD's and savings accounts with the same bank.

Calculations: To determine whether the intangible property exceeds 10% of your total assets, total the fair market value of all of your assets (including real property, intangible property, and tangible personal property such as jewelry, furniture, etc.). When making this calculation, do not subtract any liabilities (debts) that may relate to the property. Multiply the total figure by 10% to arrive at the disclosure threshold. List only the intangibles that exceed this threshold amount. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number which can be found on the lease document). Property that is only jointly owned property should be valued according to the percentage of your joint ownership. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. None of your calculations or the value of the property have to be disclosed on the form.

Example: You own 50% of the stock of a small corporation that is worth $100,000, the estimated fair market value of your home and other property (bank accounts, automobile, furniture, etc.) is $200,000. As your total assets are worth $250,000, you must disclose intangibles worth over $25,000. Since the value of the stock exceeds this threshold, you should list "stock" and the name of the corporation. If your accounts with a particular bank exceed $25,000, you should list "bank accounts" and bank's name.

PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed any amount that, at any time during the disclosure period, exceeded your net worth. You are not required to list the amount of any debt or your net worth. You do not have to disclose: credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, it is not a contingent liability.

Calculations: To determine whether the debt exceeds your net worth, total all of your liabilities (including promissory notes, mortgages, credit card debts, judgments against you, etc.). The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. Subtract the sum total of your liabilities from the value of all your assets as calculated above for Part D. This is your "net worth." List each creditor to whom your debt exceeded this amount unless it is one of the types of indebtedness listed in the paragraph above (credit card and retail installment accounts, etc.). Joint liabilities with others for which you are "jointly and severally liable," meaning that you may be liable for either your part or the whole of the obligation, should be included in your calculations at 100% of the amount owed.

Example: You owe $15,000 to a bank for student loans, $5,000 for credit card debts, and $60,000 (with spouse) to a savings and loan for a home mortgage. Your home (owned by you and your spouse) is worth $80,000 and your other property is worth $20,000. Since your net worth is $20,000 ($100,000 minus $80,000), you must report only the name and address of the savings and loan.

PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145, F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with, the types of businesses listed above. You are required to make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

. . . IMPORTANT . . . IMPORTANT . . . IMPORTANT . . .

Form 1 Filers

FORMS MUST BE FILED OR POSTMARKED BY SEPTEMBER 1

Filing late may result in automatic fines of $25 per day!
Failure to pay fines may result in salary withholding, wage garnishment, or removal from office or employment!

* * *

Read the Instructions

The Commission does not review forms for accuracy, and a complaint can be filed against you for failing to properly make a required disclosure.

* * *

Manner of Calculating Reportable Interest

You have 2 options – Comparative (Percentage) Threshold or Dollar Value Threshold.
The instructions describe each option in detail.
You must choose one and check the box that reflects your choice.

* * *

Elected Municipal Officers

Elected municipal officers and commissioners of a community redevelopment agency (created under Part III, Chapter 163) are required to complete 4 hours of ethics training each calendar year. Compliance with the training requirement must be reported on the Form 1. Elected members of a special district are not municipal officers subject to the training requirement. Report your compliance for the form year by checking the box in Part G. For more ethics training information, visit the training page on the Commission's website.

* * *

Your Disclosure is a Public Record

Do NOT put social security, bank account or credit card numbers on your Form 1.
If your home address or other information is exempt from disclosure under Section 119.071, F.S., and you want us to keep it confidential, you must submit a written request as required by Section 119.071. If you previously filed a confidentiality request with our office, you do not need to file another request this year.



Questions?

Visit our website: www.ethics.state.fl.us

Under the "Financial Disclosure" tab you can find information about your specific filing requirement, coordinator contact information, where to file, and the ability to confirm that your form has been received (please allow five business days from the date you mailed the form). Helpful general information and summaries of the Commission's most significant opinions dealing with financial disclosure can also be found here.

Contact us!

(850) 488-7864 or email: disclosure@leg.state.fl.us

USPS Tracking®

FAQs >

Track Another Package +

Tracking Number: 9414814902266849348961

Remove ×

Your item arrived at our USPS facility in GAINESVILLE FL DISTRIBUTION CENTER on November 12, 2021 at 1:23 pm. The item is currently in transit to the destination.

Arrived at USPS Regional Facility

November 12, 2021 at 1:23 pm
GAINESVILLE FL DISTRIBUTION CENTER

Get Updates ∨

Text & Email Updates ∨

Return Receipt Electronic ∨

Tracking History ∧

November 12, 2021, 1:23 pm
Arrived at USPS Regional Facility
GAINESVILLE FL DISTRIBUTION CENTER
Your item arrived at our USPS facility in GAINESVILLE FL DISTRIBUTION CENTER on November 12, 2021 at 1:23 pm. The item is currently in transit to the destination.

October 30, 2021, 8:39 am
Unclaimed/Being Returned to Sender
NORTH MIAMI BEACH, FL 33160

September 30, 2021, 1:34 am
Departed USPS Regional Facility
OPA LOCKA FL DISTRIBUTION CENTER

September 22, 2021, 11:19 am
Arrived at USPS Regional Facility
OPA LOCKA FL DISTRIBUTION CENTER

September 18, 2021, 9:42 pm
Arrived at USPS Regional Facility
GAINESVILLE FL DISTRIBUTION CENTER

September 13, 2021, 8:48 am
Unclaimed/Being Returned to Sender
NORTH MIAMI BEACH, FL 33160

Reminder to Schedule Redelivery of your item

August 2, 2021, 3:30 pm
Notice Left (No Authorized Recipient Available)
NORTH MIAMI BEACH, FL 33160

August 1, 2021
In Transit to Next Facility

July 31, 2021, 9:06 pm
Departed USPS Regional Facility
OPA LOCKA FL DISTRIBUTION CENTER

July 31, 2021, 6:17 am
Arrived at USPS Regional Facility
OPA LOCKA FL DISTRIBUTION CENTER

July 31, 2021, 5:02 am
Accepted at USPS Origin Facility
MIAMI, FL 33128

July 23, 2021
Pre-Shipment Info Sent to USPS, USPS Awaiting Item

Product Information

See Less

Can't find what you're looking for?

Go to our FAQs section to find answers to your tracking questions.

FAQs

BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re **Yesenia Gomez** **PID#: 287860**
Internal Services
Employees
Miami-Dade County

NOTICE OF ASSESSMENT OF AUTOMATIC FINE

The Commission on Ethics hereby gives notice of an assessment of a fine against you pursuant to Section 112.3145(8)(g), Florida Statutes, due to your failure to timely file your 2020 CE Form 1, Statement Of Financial Interests. Under the law, your 2020 CE Form 1, Statement of Financial Interests, was due by July 1, 2021. The law provided for a penalty-free grace period extending the due date to September 1, 2021. After that date, you accrued fines of $25.00 per day for each day your financial disclosure was late, pursuant to Section 112.3145(8)(g), Florida Statutes.

Inasmuch as your 2020 CE Form 1 was filed September 14, 2021 with the Supervisor of Elections for Miami-Dade County, you are fined the amount of $325.00 ($25.00 per day for 13 day(s) late). This fine must be paid to the Commission on Ethics within 30 days of the date of this notice unless you appeal the fine to the Commission. The Commission has the authority to consider the appeal and waive the fine in whole or in part if your failure to file on time was due to "unusual circumstances" surrounding the failure to file.

HOW TO APPEAL

1. Read these instructions carefully before submitting your appeal.
2. **LEGAL AUTHORITY:** Appeals are governed by Section 112.3145(8)(g)3., Florida Statutes, and Commission Rule 34-8.215, Florida Administrative Code.
3. **FORMAT:** Your appeal must be in writing and mailed to Florida Commission on Ethics, P. O. Drawer 15709, Tallahassee, FL 32317-5709, or delivered to Florida Commission on Ethics, 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303. The appeal may take the form of a letter or you may use the appeal form included in this mailing. The appeal form also is available at the Commission's website: www.ethics.state.fl.us. Click on "Financial Disclosure" and then the link to the sample appeal form.
4. **DUE DATE:** Your appeal must be received by the Commission on Ethics on or before **November 27, 2023**. NOTE: Failure to timely file an appeal will constitute a waiver of your right to appeal and will result in the entry of a default order against you.
5. **UNUSUAL CIRCUMSTANCES:** An appeal must demonstrate that you submitted your CE Form 1 after the extended due date because of "unusual circumstances." "Unusual circumstances" is defined in Commission Rule 34-8.215(4), Florida Administrative Code, as "uncommon, rare, or sudden events over which the reporting individual had no control and which directly result in the failure to act in accordance with the filing requirements." Therefore, circumstances that allowed for time to take steps necessary to file on time do not constitute "unusual circumstances" that will allow the Commission to waive the fine. You have the burden to establish "unusual circumstances." Your appeal must specifically state the circumstances that led to your not filing by September 1, 2021, and must include any documentation or evidence supporting your appeal, such as:
   a. **SICKNESS/INJURY:** a statement from attending physician, including dates and nature of the illness or injury;
   b. **LACK OF NOTICE (WRONG ADDRESS):** documentation that you did not reside at the address to which notice was sent;
   c. **LACK OF NOTICE (ABSENCE FROM HOME):** documentation establishing the period of time of your absence covering the notification period;

d. **CLAIM OF TIMELY FILING OF FINANCIAL DISCLOSURE:** (1) an affidavit from you attesting under oath or affirmation that you filed your financial disclosure and your recollection of when and how you filed and (2) a copy of a certified mail receipt and/or a copy of the completed form which was filed. If you have witnesses to your filing, we also will need an affidavit from each witness. NOTE: A claim of having filed the CE Form 1F for the current year does not satisfy the CE Form 1 filing requirement or excuse a late filing;

e. **LEFT PUBLIC POSITION BEFORE DECEMBER 31, 2020:** confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2020; or

f. **UNCLAIMED CERTIFIED MAIL**: if deliquency notice was addressed correctly but not received, you must explain why.

6. **YOUR RIGHT TO A HEARING:** You have the right to have your appeal heard by the Commission and to appear before the Commission at the hearing, but, to exercise this right, you must specifically request a hearing in your appeal. If you do not request a hearing, you will waive your right to a hearing, the Commission will determine the outcome of your appeal based upon the written record (including the documentation you provide and any documentation in your case file), and you will receive no further notice until after the Commission decides your appeal.

FAILURE TO PAY FINE OR FILE APPEAL WITHIN 30 DAYS

If you do not timely file an appeal or pay the assessed fine within 30 days of this Notice, a default order will be entered against you and the Commission will take the steps provided by law to collect the fine, including:

- Referral to the CFO of the Department of Financial Services, if you are a salaried state officer or employee, for withholding of a portion of you salary until the fine is satisfied; or
- Referral to your agency's governing body for withholding of a portion of your salary until the fine is satisfied;
- Referral to a collection agency, which can seek garnishment of your wages; and/or
- An additional civil penalty, not limited by this automatic fine, may be imposed if your disclosure statement is filed more than 60 days late and a complaint is filed against you pursuant to Section 112.324, Florida Statutes.

Please contact our office if you have any questions about this matter.

CERTIFICATE OF MAILING

I certify that a copy of the foregoing Notice of Assessment of Automatic Fine was furnished to:

Yesenia Gomez
111 NW 1st Street STE 1300
Miami, FL 33128

by Certified Mail on this Thursday, October 26, 2023.

KIMBERLY R. HOLMES
Program Administrator

Florida Commission on Ethics
P. O. Drawer 15709
Tallahassee, FL 32317-5709

-or-

Florida Commission on Ethics
325 John Knox Road, Building E, Ste. 200
Tallahassee, FL 32303

Tel.: (850) 488-7864
Fax: (850) 488-3077
Email: disclosure@leg.state.fl.us

Mail Piece Details

Print this page

Recipient Address

YESENIA GOMEZ
111 NW 1ST ST STE 1300
MIAMI, FL 33128-1924

Record / Case Number:
287860

Return Address

STATE OF FLORIDA
COMMISSION ON ETHICS
PO DRAWER 15709
TALLAHASSEE, FL 32317-5709

Entry Point ZIP:
32317

Mail Piece Information

Tracking Number: 9214890106615400019013807 7
Date Created: 10/26/2023 02:39:35 PM
Mail Class: USPS First Class Mail
Special Services: Certified Mail
Return Receipt Electronic
Memo: --
Created By: Kimberly Holmes - Commission on Ethics

Signature Information

Signed For By: YESENIA GOMEZ
Signature Status: Available (Click Here)

Having issues viewing the signature file?
Make sure you are using the latest version of Adobe Acrobat Reader

Tracking Information

Pre-Shipment Info Sent To Usps, Usps Awaiting Item, October 26, 2023, 12:00:00 AM

Pre-Shipment Info Sent Usps Awaits Item, October 26, 2023, 01:49:00 PM, TALLAHASSEE,FL 32317

Processed Through Usps Facility, October 29, 2023, 08:52:00 AM, MIAMI FL DISTRIBUTION CENTER 33152

Processed Through Usps Facility, October 29, 2023, 01:53:00 PM, MIAMI FL DISTRIBUTION CENTER 33152

Processed Through Usps Facility, October 29, 2023, 06:06:00 PM, MIAMI FL DISTRIBUTION CENTER 33152

Delivered Front Desk/Reception/Mail Room, October 30, 2023, 04:59:00 PM, MIAMI,FL 33128

Adobe is a registered trademark of Adobe Systems Incorporated in the United States and/or other countries.
For the latest version of Adobe® Reader® click here.

UNITED STATES POSTAL SERVICE

October 30, 2023

Dear MAIL MAIL:

The following is in response to your request for proof of delivery on your item with the tracking number: **9214 8901 0661 5400 0190 1380 77**.

Item Details	
Status:	Delivered, Front Desk/Reception/Mail Room
Status Date / Time:	October 30, 2023, 4:59 pm
Location:	MIAMI, FL 33128
Postal Product:	USPS Ground Advantage™
Extra Services:	Certified Mail™
	Return Receipt Electronic
Recipient Name:	YESENIA GOMEZ

Recipient Signature

Signature of Recipient: 

Address of Recipient: 

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely,
United States Postal Service®
475 L'Enfant Plaza SW
Washington, D.C. 20260-0004

The customer reference information shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

Reference ID: 9214890106615400019013807 7
287860
YESENIA GOMEZ
111 NW 1st St Ste 1300
Miami, FL 33128-1924

Form Year 2020 Filed Forms

FORM TYPE	DATE SUBMITTED	FORM SIGNED	FILED BY EMAIL?	UPDATED BY	COMMENTS
Form 1	09/14/2021	No	Yes	Emily Prine	Received by COE on behalf of Miami-Dade Supervisor of Elections

Fine Year 2021 Fine Information

FINE BALANCE	STATUS	FINE DATE	ORIGINAL FINE AMOUNT	ADJUSTED FINE AMOUNT	LAST PAYMENT DATE	PAYMENT PLAN START DATE	PAYMENT PLAN AMOUNT	TOTAL PAYMENT PLAN AMOUNT DUE
$325.00	Appeal	10/25/2023	$325.00	$325.00				

Fine Address: 1805 SANS SOUICI BLVD APT 522, NORTH MIAMI, FL 33181
Email: YESENIA.GOMEZ@MIAMIDADE.GOV
Org/Suborg: Miami-Dade County - Employees

Fine Year 2021 Appeal Information

2021 FINE APPEAL - FD 21-082	No Hearing Scheduled
APPEAL STATUS	Active
APPEAL RECEIPT DATE	11/27/2023
APPEAL TIMELY FILED	Yes
PRINT APPEAL LETTER	
HEARING REQUESTED	No
APPEAL REASON	Illness or Injury
APPEAL NOTES	
APPEAL NUMBER	FD 21-082
APPEAL ANALYST ASSIGNED	
FINAL ORDER NUMBER	
FINAL ORDER DATE	

Fine Year 2021 Payment Information

DATE POSTED	DESCRIPTION	AMOUNT	METHOD	PAYMENT ID	COMMENT
10/25/2023	Fine Levied	+$325.00			Fined $325.00
Current Balance: $325.00					

Fine Year 2021 Event Chronology

DATE	TYPE	DESCRIPTION	ADDRESS/EMAIL	REFERENCE
09/08/2021	Filer Correspondence Letter	Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing	3660 Ne 166th St Apt 315, N Miami Beach, FL 33160-3820 UNKNOWN@email.com	KimberlyHolmes

10/25/2023	Fine Levied	Fined $325.00		Journal: Fine_Miami-Dade_2023-10-25-09:58
10/25/2023	Notice of Assessed Fine	Initial Fine Notice		Journal: Fine1st_2023-10-25-10:20
10/26/2023	Filer Correspondence Letter	Notice of Assessed Fine - Filer 1st Fine Letter	111 NW 1st Street Suite 1300, Miami, FL 33128 UNKNOWN@email.com	Correspondence Queue: 2023-10-26 00:00:00 Correspondence Sent: 2023-10-26 00:00:00.0000000
08/22/2024	Filer Correspondence: Letter	Fine Appeal - Fine Appeal	1805 SANS SOUICI BLVD APT 522, NORTH MIAMI, FL 33181 YESENIA.GOMEZ@MIAMIDADE.GOV	Correspondence Queue: 2024-08-22 00:00:00 Correspondence Sent: 2024-08-22 00:00:00.0000000
08/22/2024	Fine Appeal	FD 21-082		Journal: Appeal_2024-08

Created Date: 8/22/2024
Type: Letter
Created By: System
Description: Fine Appeal - Fine Appeal

Created Date: 11/27/2023
Type: Email
Created By: Emily E Prine
Description:
From: Gomez, Yesenia (DSWM) <Yesenia.Gomez@miamidade.gov>
Sent: Monday, November 27, 2023 8:50 AM
To: Miami-Dade Elections Department - Financial Disclosures <FINDISCELEC@miamidade.gov>; COE-Form1 <ceform1@leg.state.fl.us>; disclosure <disclosure@leg.state.fl.us>
Subject: Yesenia Gomez Financial Statement_ Sensitive case

Some people who received this message don't often get email from yesenia.gomez@miamidade.gov. Learn why this is important
Good morning,

Please see attached, if you need to contact me you can do it through this email or my personal cell phone # 786-342-9062. Thank you!!!

Regards,

From: Gomez, Yesenia (ISD)
Sent: Tuesday, September 14, 2021 10:02 AM
To: 'CEFORM1@leg.state.fl.us.' <CEFORM1@leg.state.fl.us>; Financial Disclosures (Elections) < FINDISCELEC@miamidade.gov>

Cc: 'Green.Keyana' <GREEN.KEYANA@leg.state.fl.us>
Subject: RE: Form 1

Good morning Keyana,

I we spoke I am sending the Statement of Financial, I don't know the email you sent me it

From: Green.Keyana <GREEN.KEYANA@leg.state.fl.us>
Sent: Tuesday, September 14, 2021 9:21 AM
To: Gomez, Yesenia (ISD) <Yesenia.Gomez@miamidade.gov>
Subject: Form 1

EMAIL RECEIVED FROM EXTERNAL SOURCE

Good Morning,

Attached is the Form 1 you've requested. You may email it back to us at CEFORM1@leg.state.fl.us

Have a great day!

Sincerely,

Keyana L. Green

Executive Secretary/Financial Disclosure

850-488-7864

Florida Commission on Ethics
Post Office Drawer 15709
Tallahassee, FL 32317-5709

Created Date: 10/26/2023
Type: Letter
Created By: System
Description: Notice of Assessed Fine - Filer 1st Fine Letter

Created Date: 9/14/2021
Type: Phone
Created By: admin system
Description: Filer called a stated she moved and received her notices late. She requested a form and stated she would file today.

Created Date: 9/8/2021
Type: Letter
Created By: System
Description: Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing

Created Date: 8/20/2021
Type: Postcard
Created By: System
Description: Courtesy Postcard Reminder - Courtesy Postcard Reminder