



FINAL SOURCE OF INCOME STATEMENT (SOI-F)

To be filed any time after leaving public office, service, or employment but no later than 12:00 noon of the July 1st following the last year that person was a public employee or official.

Disclosure for Tax Year Ending	Last Name (or, Consultant or Consulting Firm name)	First Name	Middle Name/Initial
Mailing Address – Street Number, Street Name, or P.O. Box			
City, State, Zip			

If your home address is your mailing address, and your home address is exempt from public records pursuant to Fla. Stat. §119.07, read instructions on the following page **and check here.** ☐

Disclosure Period:

This statement reflects my financial interests for the period between January 2024 and the last date I held public office or employment which was _____, 2024. (date must be prior to 12/31/24)

Filing as an Employee (check one)

<input type="checkbox"/> County	<input type="checkbox"/> Public Health Trust	<input type="checkbox"/> Municipal: _____ (Municipality)
Department		
Position or Title		Employee ID Number
Work address		Work telephone

Filing as a Board Member (check one)

<input type="checkbox"/> County Board	<input type="checkbox"/> Municipal Board: _____ (Municipality)	<input type="checkbox"/> Consultant for County or Municipal Agency
Board where serving or name of County or Municipal Agency Consultant is providing professional services to		
Alternate address (if home address is exempt)		Work telephone

List below every source of income you received, along with the address and the principal activity of each source. Include your public salary. Place the sources of income in descending order, with the largest source first. Examples of sources of income include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, and social security payments. Also, include any source of income received by another person for your benefit. However, the income of your spouse or any business partner need not be disclosed. **If continued on a separate sheet, check here.** ☐

Name of Source of Income	Address	Description of the Principal Business Activity

I hereby swear (or affirm) that the information above is a true and correct statement.

Signature of Person Disclosing

Date signed

RECEIVED BY ELECTIONS DEPARTMENT:

- ☐ Hardcopy
☐ Electronic Copy

FINAL SOURCE OF INCOME FORM (SOI-F) INFORMATION

Required by the Miami-Dade County Code, Section 2-11.1(i)

FILING INSTRUCTIONS

A Final Source of Income Form (SOI-F), or a copy of the personal income tax form may be filed to satisfy the final financial disclosure requirement upon leaving public office, service, or employment for County/Public Health Trust employees, municipal employees, advisory board members, and consultants providing professional services to the County or a Municipality (not required to file under State law). Those that file State Form 1 who also hold County or Municipal positions (for example, State filers who also serve on County or Municipal boards) meet the County final financial disclosure requirement by filing a copy of their State Form 1F with the Miami-Dade County Elections Department or their Municipal clerk. The SOI-F should not be used as a substitute for State Form 1 or State Form 1F for those required to file under state requirements.

The term **INCOME** shall include, but is not limited to, the following items: wages, salaries; tips; bonuses; commissions and fees; dividends, interest; profits from businesses and professions; your share of profits from partnerships and small business corporations; pensions, annuities and endowments; profits from the sale or exchange of real estate, securities or other property, including personal residence; rents and royalties; your share or estate or trust income, including accumulated distributions; alimony, separate maintenance or support payments; prizes; awards; fees as an Executor, Administrator or Director; disability retirement payments; workmen's compensation, insurance; damages; and social security payments, etc.

Filers whose address is exempt pursuant to Fla. Stat. §119.07 must provide an alternate address such as a business address or the address of the board if the filer serves on a board.

This form may be filed **immediately** upon leaving public office or employment or any time thereafter, **but no later than 12:00 noon** of the July 1st following the last year that person was a public employee or official unless the person takes another position after departure from public office or position that requires filing a Source of Income Form.

Example: Ms. Smith retires from County employment on April 14, 2024. She may file the SOI-F form for the year 2024 at the time of her separation or any time prior to 12:00 noon of July 1, 2024. Please note that because she was a County employee in 2023 she will also have to file a Source of Income Form for the year 2023 by July 1, 2024.

Example (Review sources of income above; note, no monetary amount required).

Name of Source of Income	Address	Description of Principal Business Activity
Place of employment	Address where employed	Salary
Rental Property	123 Anywhere Street Miami, FL 00000	Rental income
Social Security	Social Security office closest to your zip code	Social Security income

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

Miami-Dade County (including Public Health Trust) Personnel and Advisory Board members shall file completed forms with:

Miami-Dade Elections Department
Attn: Financial Disclosure Section
2700 NW 87th Avenue
Miami, FL 33172

or

P.O. Box 521550
Miami, FL 33152-1550

or at: financial.disclosures@miamidade.gov

Municipal Personnel and Advisory Board Members shall file completed forms with their respective Municipal Clerk. For further information, Miami-Dade County and Public Health Trust employees may contact the Miami-Dade Elections Department Financial Disclosure Section via telephone at 305-499-8413 or via email at financial.disclosures@miamidade.gov. Municipal employees may contact their respective Municipal Clerk's Office.

Note RE: Florida Statutes § 119.07: The role of our office is to receive and maintain forms filed as public records. If your home address is exempt from disclosure and you do not wish your home address to be made public, please use your office or other address for your mailing address. The following persons are exempt from disclosing their home addresses: active or former law enforcement personnel, including correctional and correctional probation officers, personnel of the Department of Children and Family Services whose duties include the investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities, personnel of the Department of Health whose duties are to support the investigation of child abuse or neglect, and personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement; firefighters; justices and judges; current or former state attorneys, assistant state attorneys, statewide prosecutors, or assistant statewide prosecutors; county and municipal code inspectors and code enforcement officers.