| FORM 6 FULL AND PUBLIC DISCLOSURE OF 2012  |                                  |                                |  |  |  |
|--|----------------------------------|--------------------------------|--|--|--|
| Please print or type your name, mailing address, agency name, and position below:  FINANCIAL INTERESTS  FOR OFFICE USE ONLY:                             |                                  |                                |  |  |  |
| LAST NAME — FIRST NAME — MIDDLE NAME:  |                                  |                                |  |  |  |
| Rundle, Katherine Fernandez  MAILING ADDRESS:  | PROCE                            | CCED                           |  |  |  |
| 1350 NW 12 Avenue  |                                  | OOEU                           |  |  |  |
| 1550 144 12 /40/100  |                                  |                                |  |  |  |
|  | 10000                            | OMMISSION ON ETHICS            |  |  |  |
| CITY: ZIP: COUNTY:   | 1 (1444                          | DATE RECEIVED                  |  |  |  |
| Miami 33136 Miami-Dade   | ] ~   - /                        | JUL 0 1 2013                   |  |  |  |
| NAME OF AGENCY:  |                                  |                                |  |  |  |
| Office of the State Attorney  NAME OF OFFICE OR POSITION HELD OR SOUGHT:   |                                  | a Popula i                     |  |  |  |
| State Attorney   | CONFIDE                          | NIAL                           |  |  |  |
| CHECK IF THIS IS A FILING BY A CANDIDATE   |                                  |                                |  |  |  |
| PART A NET WORTH   |                                  |                                |  |  |  |
| Please enter the value of your net worth as of December 31, 2012, or a more current date. [Note:   | · Net worth is not calculated by | v subtraction your reported    |  |  |  |
| liabilities from your reported assets, so please see the instructions on page 3.]  | , Net WUITH IS HUL Calculated by | y subtracting your reported    |  |  |  |
| My net worth as of December 31, 20 12 was  | \$\$2,368,641.63                 | <u></u> .                      |  |  |  |
| DADT D. ACCETTO  |                                  |                                |  |  |  |
| PART B ASSETS  |                                  |                                |  |  |  |
| HOUSEHOLD GOODS AND PERSONAL EFFECTS:  Household goods and personal effects may be reported in a lump sum if their aggregate value ex                    | xceeds \$1,000. This category in | ncludes any of the following,  |  |  |  |
| if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; a other household items; and vehicles for personal use. | art objects; household equipme   | ent and furnishings; clothing; |  |  |  |
| The aggregate value of my household goods and personal effects (described above) is \$   | ,000.00 (approx.)                |                                |  |  |  |
| ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:  |                                  |                                |  |  |  |
| DESCRIPTION OF ASSET (specific description is required - see instruction   | s page 4)                        | VALUE OF ASSET                 |  |  |  |
| See attached.  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
| PART C LIABILITIES   |                                  |                                |  |  |  |
| LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4):   |                                  |                                |  |  |  |
| NAME AND ADDRESS OF CREDITOR   |                                  | AMOUNT OF LIABILITY            |  |  |  |
| See attached.  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
| JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR   | 1                                | AMOUNT OF LIABILITY            |  |  |  |
|  |                                  | AMOUNT OF LIABILITY            |  |  |  |
| N/A  |                                  |                                |  |  |  |
|  |                                  |                                |  |  |  |
|  | l l                              | 1                              |  |  |  |

|   |   |                              |   |  | ***************************************                                    |  |
|---|---|------------------------------|---|--|--|--|
|   |   | PART D                       | INCOME  |  |  |  |
| You may <b>EITHER</b> (1) file a complete identifying each separate source a D, below.            | te copy of your 2012 federal in<br>and amount of income which | ncome tax re<br>exceeds \$1, | turn, <i>including all W2</i> 's, so<br>000, including secondary        | chedules, and attachmer<br>sources of income, by o | nts, <b>OR</b> (2) file a sworn statement completing the remainder of Part |  |
|   | 2012 federal income tax retu<br>attach a copy of your 2012 ta |                              | •   |  |  |  |
| PRIMARY SOURCES OF INCOM<br>NAME OF SOURCE OF INCOM   |   | e 5):                        | ADDRESS OF SOURC  | E OF INCOME  | ı AMOUNT   |  |
| See attacl  | hed.  |                              |   |  |  |  |
|   |   |                              |   |  |  |  |
|   |   |                              |   |  |  |  |
|   |   |                              |   |  |  |  |
| SECONDARY SOURCES OF INC  | COME [Major customers, clien                                  | nts etc. of b                | usinesses owned by rend   | orting personsee instru                            | ctions on nage 51:   |  |
| NAME OF<br>BUSINESS ENTITY  | NAME OF MAJOR :<br>OF BUSINESS' II                            | SOURCES                      | ADDRE OF SOL  | ESS  | PRINCIPAL BUSINESS<br>ACTIVITY OF SOURCE                                   |  |
| N/A   |   |                              |   |  |  |  |
|   |   |                              |   |  |  |  |
|   |   |                              |   |  |  |  |
| . PAI   | RT E INTERESTS IN BUSINESS ENTITY                             |                              | ED BUSINESSES [In   | • 0  | 6 <br>BUSINESS ENTITY # 3  |  |
| NAME OF<br>BUSINESS ENTITY  | N/A   |                              | MINISTER AND                        |  | 20011200 2,1111 1110   |  |
| ADDRESS OF<br>BUSINESS ENTITY   |   |                              |   |  |  |  |
| PRINCIPAL BUSINESS<br>ACTIVITY  |   |                              |   |  |  |  |
| POSITION HELD<br>WITH ENTITY  |   |                              |   |  |  |  |
| I OWN MORE THAN A 5%<br>INTEREST IN THE BUSINESS  |   |                              |   |  |  |  |
| NATURE OF MY<br>OWNERSHIP INTEREST  |   |                              |   |  |  |  |
| IF ANY OF PARTS A   | THROUGH E ARE CO  | ONTINUE                      | D ON A SEPARATE   | SHEET, PLEASE C                                    | CHECK HERE 🔲   |  |
| OATH  |   | -                            | STATE OF FLORIDA COUNTY OF Miami Dade                                   |  |  |  |
| I, the person whose name appears at the   |   | Sv                           | Sworn to (or affirmed) and subscribed before me this <u>28th</u> day of |  |  |  |
| beginning of this form, do depose   |   |                              | ·<br>_  | Vathor   | cino Formandos Desilo  |  |
| and say that the information disclosed on this form and any attachments hereto is true, accurate, |   |                              | June 20 13 by Katherine Fernandez Rundle                                |  |  |  |
| and complete.   |   | (                            | Carrol GARIDAD Y CARONESTE  |  |  |  |
| (Signature of Notery Public Store   |   |                              | EXPIRES: June 20, 2014<br>Bonded Thru Budget Notary Services            |  |  |  |
| 11/1/1/1/1/1/1  |   | (P                           | (Print, Type, or Stamp Commissioned Name of Notary Public)              |  |  |  |
| SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE Personali  |   |                              | ersonally KnownX  | OR Produced I                                      | dentification n/a  |  |
|   |   | Ту                           | pe of Identification Produ  | iced n/a   |  |  |
| FILING INSTRUCTIONS for wi  | file this form and how to                                     | o fill it out                | •   | page 3.  |  |  |

# FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS

# PART B—ASSETS

### ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

#### PART C – LIABILITIES

#### **CREDITORS**

 Capital Bank
 \$ 149,105.40 (approx.)

 9350 S Dixie Highway Suite 1120

 Miami, Fl 33156

 Silver Grove, Inc.
 450,000.00 (approx.)

 133 Aragon Avenue

 Coral Gables, FL 33134
 Total: \$599,105.40 (approx.)

### PART D- INCOME

## PRIMARY SOURCES OF INCOME (WHICH EXCEEDS \$1,000):

| State of Florida Salary<br>1350 NW 12 Avenue<br>Miami, FL 33136   | \$150,077.04 (approx.) |
|---|------------------------|
| State of Florida Vehicle<br>Miami-Dade County   | \$14,270.41 (approx.)  |
| Bevy Briggs<br>5241 Jennings Street<br>Naples, FL 34113   | \$1,800.00 (approx.)   |
| Robert Feinschreiber<br>Margaret Kent<br>1121 Crandon Boulevard<br>Suite F301<br>Key Biscayne, FL 33149 | \$6,000.00 (approx.)   |
| Miami-Dade County, FL<br>111 NW 1 Street<br>Miami, FL 33130   | \$1,520.83 (approx.)   |
| General Electric Capital Corp.<br>901 Main Avenue<br>Norwalk, CT 06828                                  | \$1,218.76 (approx.)   |
| Bank of America Corp.<br>100 North Tryon Street<br>Charlotte, NC 28255                                  | \$1,187.50 (approx.)   |
| Raul Greaves<br>12903 SW 133 Court<br>Miami, FL 33186   | \$2,600.00 (approx.)   |
| First Eagle Global Fd<br>1345 Avenue of the Americas<br>New York, NY 10105                              | \$1,119.47 (approx.)   |
| Templeton Global Bond Fd<br>100 Fountain Parkway<br>St. Petersburg, FL 33716                            | \$1,075.16 (approx.)   |