

Mary Esther Municipal Elections
August 20, 2024

OFFICE: **MARY ESTHER CITY COUNCIL**
Term of office is four years for two seats.

WHERE TO QUALIFY: SUPERVISOR OF ELECTIONS' OFFICES

Okaloosa County Complex
1250 Eglin Parkway, Suite 103
Shalimar, FL 32579-1294

Buddy Brackin Building
302 Wilson Street North, Suite 102
Crestview, FL 32536-3440

QUALIFYING FEE: \$42.00 (Must be remitted by Campaign Account Check payable to Supervisor of Elections)

1% Election assessment, remitted to state Election Commission Trust Fund, based on money received that does not require expense vouchers. (F.S. 99.093-1% Election Assessment may be waived by filing an Affidavit of Undue Burden DS-DE 78)

QUALIFYING FORMS AND REQUIREMENTS:

PETITION	Signed by five qualified electors of the City of Mary Esther
DS-DE 9	Appointment of Campaign Treasurer
CE Form 6	Financial Disclosure
CE Form 10	Gifts Disclosure (if applicable)
DS-DE 302NP	Candidate Oath
DS-DE 84	Statement of Candidate (Must be received in our office within 10 days after submitting Appointment of Campaign Treasurer)

MUST BE REGISTERED TO VOTE AND LIVE IN THE LIMITS OF THE CITY OF MARY ESTHER. TWO SEATS ARE UP FOR CANDIDACY AND ARE ELECTED AT LARGE BY THE HIGHEST NUMBER OF VOTES.

DATES: **ELECTION DAY August 20, 2024**

Qualifying – Noon Monday, June 10 – Noon Friday, June 14, 2024

Treasurer Reports must be filed electronically to Supervisor of Elections office no later than midnight of designated due date. *Candidate is liable for a fine for late filing.*

Qualifying Documents Instructions

DS-DE 9 APPOINTMENT OF CAMPAIGN TREASURER – *If you have already filed this document during pre-filing you do not need to file another one.* This form must be filed with our office **before** you open a campaign account. Blocks 18 – 24 are for the bank you intend to use when you open your account.

DS-DE 84 STATEMENT OF CANDIDATE – *If you have already filed this document during pre-filing you do not need to file another one.* If you have not read Chapter 106 of the Florida Statutes you are allowed to take up to 10 days after filing the DS-DE 9 Appointment of Campaign Treasurer to read Chapter 106 of the Florida Statutes and then file this document.

STATEMENT OF CANDIDATE REQUIREMENT – *If you have already filed a DS-DE 84 Statement of Candidate during pre-filing you do not need to file this document. If you have already read Chapter 106 of the Florida Statutes and you are filing a DS-DE 84 Statement of Candidate with your qualifying paperwork you do not need to file this document.* If you are going to take some time (up to 10 days) to read Chapter 106 of the Florida Statutes after filing your DS-DE 9 Appointment of Campaign Treasurer but before filing your DS-DE 84 Statement of Candidate you will need to file this document. This document records the date your 10 days start and the date the signed DS-DE 84 Statement of Candidate is due.

DS-DE 302NP CANDIDATE OATH – NONPARTISAN OFFICE – This document must be notarized. Our office can notarize this for you free of charge. If you want us to notarize this for you please wait until you are in front of the notary public in our office before signing the document.

CE FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS – Instructions are provided in the packet for completing and filing this document. This document must be filed online at <https://disclosure.floridaethics.gov/Account/Login?ReturnUrl=%2f>. Candidates must turn in a copy of the filed Form 6 with their qualifying documents. If you have questions about filling out this form please direct them to the Florida Commission on Ethics at (850) 488-7864.

EQUIPMENT TEST NOTICE RECEIPT – Our office extends an invitation to every candidate to attend the logic and accuracy testing of the equipment that will be in service for the Municipal election. This can be found in your packet. We have you sign the Equipment Test Notice Receipt acknowledging you have received the invitation.

Most of the other documents in the qualifying packet are informational. However, please take the time to look them over. Some municipalities require a residency affidavit, so be sure to fill it out if it is in your packet. The CAMPAIGN TREASURER'S REPORT SUMMARY, CAMPAIGN TREASURER'S REPORT – CONTRIBUTIONS, CAMPAIGN TREASURER'S REPORT – EXPENDITURES, AND WAIVER OF REPORT are samples only. You must file your treasurer reports electronically via our website. We will provide you with a login ID, password, and pin numbers to use when logging in and filing your reports.

QUALIFYING PAPERWORK CAN BE SUBMITTED TO OUR OFFICE UP TO TWO WEEKS PRIOR TO THE FIRST DAY OF QUALIFYING. QUALIFYING WEEK IS NOON, JUNE 10 2024 – NOON, JUNE 14, 2024.



Paul Lux, Okaloosa County Supervisor of Elections

Dear Candidate:

Congratulations on entering the political arena as a candidate. Public service is often not given the value it really deserves, yet it is the lifeblood of our representative government. You are to be commended for wanting to serve.

Our office is here to provide you with all the information, paperwork, and technical assistance that you may need, however, we cannot get involved in campaign management and the political side of campaigns.

Electronic filing of campaign reports is now required. We provide free computer access and training, and we believe you will find electronic filing much to your advantage, as the program actually prevents many common errors. Again, we will provide as much technical assistance as needed.

Best wishes for a successful campaign!

Sincerely,

A handwritten signature in blue ink, appearing to read "Paul Lux".

Paul Lux, CERA
Okaloosa County Supervisor of Elections

Your Vote Counts!
www.govote-okaloosa.com

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the filing officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last):
(Please Print or Type Name)

3. Address (include PO Box or Street, City, State, Zip Code):

4. Telephone:

()

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

7. Office Sought (include district, circuit, group, or seat #):

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. _____ Party candidate.

10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

12. Telephone:

()

13. Email Address:

14. Mailing Address:

15. City:

16. State:

17. Zip Code:

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

20. Address:

21. City:

22. County:

23. State:

24. Zip Code:

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

26. Signature of Candidate:

X

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)

I, _____ do hereby accept the appointment designated above as:
(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date:

29. Signature of Campaign Treasurer or Deputy Treasurer

X

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

I, _____ ,
candidate for the office of _____ ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X

Signature of Candidate

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

NOTICE TO: CANDIDATES

FROM: PAUL LUX
SUPERVISOR OF ELECTIONS

SUBJECT: STATEMENT OF CANDIDATE REQUIREMENT

I have filed an appointment of campaign treasurer form and understand that, within ten days, I am required to read Chapter 106 of the Florida Statutes and file a Statement of Candidate with the Supervisor of Elections office.

I have received the Statement of Candidate form and have been provided access to Chapter 106.

Signature of Candidate

Today's Date

Supervisor of Elections / Deputy

Due Date:



Okaloosa County Supervisor of Elections

CANDIDATE OATH

NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)
Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

OFFICE USE ONLY

Candidate Oath

Name to appear on ballot: _____

Check box if two last names without hyphen. (Name cannot be changed after qualifying.)

Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the nonpartisan office of _____, _____, _____,
(Office) (District #)

_____, _____; I am a qualified elector of _____ County, Florida.
(Circuit #) (Group or Seat #)

I am a qualified elector under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Statement of Outstanding Fines, Fees, or Penalties

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).

YES, I Do _____ NO, I Do Not _____

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X _____ ()
Signature of Candidate Telephone Number Email Address

Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF _____

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

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence

this _____ day of _____, 20____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

Phonetic Spelling of Name

Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 3 of this form):

Statement of Outstanding Fines, Fees or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity

Affidavit of Nickname (Only required if using nickname for the ballot.)

My legal name is _____. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is _____. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: _____

STATE OF FLORIDA

COUNTY OF _____

Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means

of online notarization OR physical presence

this _____ day of _____, 20_____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

DO NOT SUBMIT THIS PAGE TO THE FILING OFFICER

**Guide for Designating Phonetic Spelling
of Candidate's Name for Audio Ballot**

1. Use the tables below.
2. Use upper case for "stressed" syllables. Use lowercase for "unstressed" syllables.
3. Use dashes (-) to separate syllables.
4. Add any notes such as rhyming examples, silent letters, etc.

Vowels			
Stressed Vowel Sounds		Unstressed Vowel Sounds	
EE	(FEET) <i>feet</i>	uh	(SO-fuh) <i>sofa</i> (FING-guhr) <i>finger</i>
I	(FIT) <i>fit</i>		
E	(BED) <i>bed</i>		
A	(KAT) <i>cat</i> (KAD) <i>cad</i>		
AH	(FAH-thur) <i>father</i> (PAHR) <i>par</i>		
AH	(HAHT) <i>hot</i> (TAH-dee) <i>toddy</i>		
UH	(FUHJ) <i>fudge</i> (FLUHD) <i>flood</i>		
UH	(CHUHRCH) <i>church</i>		
AW	(FAWN) <i>fawn</i>	Certain Vowel Sounds with R	
U	(FUL) <i>full</i>	AHR	(PAHR) <i>par</i>
OO	(FOOD) <i>food</i>	ER	(PER) <i>pair</i>
OU	(FOUND) <i>found</i>	IR	(PIR) <i>peer</i>
O	(FO) <i>foe</i>	OR	(POR) <i>pour</i>
EI	(FEIT) <i>fight</i>	OOR	(POOR) <i>poor</i>
AI	(FAIT) <i>fate</i>	UHR	(PUHR) <i>purr</i>
OI	(FOIL) <i>foil</i>		
YOO	(FYOOR-ee-uhs) <i>furios</i>		

Consonants			
B	(BED) <i>bed</i>	R	(RED) <i>red</i>
D	(DET) <i>debt</i>	S	(SET) <i>set</i>
F	(FED) <i>fed</i>	T	(TEN) <i>ten</i>
G	(GET) <i>get</i>	V	(VET) <i>vet</i>
H	(HED) <i>head</i>	Y	(YET) <i>yet</i>
HW	(WHICH) <i>which</i>	W	(WICH) <i>witch</i>
J	(JUHG) <i>jug</i>	CH	(CHUCRCH) <i>church</i>
K	(KAD) <i>cad</i>	SH	(SHEEP) <i>sheep</i>
L	(LAIM) <i>lame</i>	TS	(ITS) <i>its</i> (PITS-feeld) <i>Pittsfield</i>
M	(MAT) <i>mat</i>	TH	(THEI) <i>thigh</i>
N	(NET) <i>net</i>	TH	(THEI) <i>thy</i>
NG	(SING-uhr) <i>singer</i>	ZH	(A-zuhr) <i>azure</i> (VI-zuhhn) <i>vision</i>
P	(PET) <i>pet</i>	Z	(GOODZ) <i>goods</i> (HUH-buhz-tuhn) <i>Hubbardston</i>

Examples of Phonetically Spelled Names	
NAME ON BALLOT	PRONOUNCED AS
Mishaud	mee-SHO ('d' is silent)
Jahn	HAHN (rhyme: fawn)
Beauprez	boo-PRAI (rhyme: hooray)
Maniscalco	man-uh-SKAL-ko
Tangipahoa	TAN-ji-pah-HO-uh
Monte	Mahn-TAI
Tanya	TAWN-yuh (not TAN)

DO NOT SUBMIT THIS PAGE TO THE FILING OFFICER

2022 Form 6 Instructions Full and Public Disclosure of Financial Interests

Notice

Annual Full and Public Disclosure of Financial Interests is due July 3, 2023. If the annual form is not submitted via the electronic filing system created and maintained by the Commission by September 1, 2023 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. 112.3144, F.S. - applicable to officials other than judges]

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.]

Instructions for Completing and Filing Form 6 Full and Public Disclosure of Financial Interests

When to File:

Officeholders: No later than July 3, 2023

Candidates: During the qualifying period.

Who Must File Form 6:

All persons holding the following positions: Governor, Lieutenant Governor, Cabinet members, members of the Legislature, State Attorneys, Public Defenders, Clerks of Circuit Courts, Sheriffs, Tax Collectors, Property Appraisers, Supervisors of Elections, County Commissioners, elected Superintendents of Schools, members of District School Boards, Mayor and members of the Jacksonville City Council, Judges of Compensation Claims; the Duval County Superintendent of Schools, and members of the Florida Housing Finance Corporation Board, each expressway authority, transportation authority (except the Jacksonville Transportation Authority), bridge authority, toll authority, or expressway agency created pursuant to Chapter 348 or 343, F.S., or any other general law, and judges, as required by Canon 6, Code of Judicial Conduct.

Attachments:

A filer may include and submit attachments or other supporting documentation when filing a disclosure.

Public Record:

The disclosure form is a public record and is required by law to be posted to the Commission's website. **Your Social Security number, bank account, debit, charge, and credit card numbers, mortgage or brokerage account number, personal identification number, or taxpayer identification number are not required and should not be included.** If you are an active or former officer or employee listed in Section 119.071, F.S., whose home address or other information is exempt from disclosure, the Commission will maintain that confidentiality **if you submit a written and notarized request.**

Questions about this form or the ethics laws may be addressed to the Commission on Ethics, Post Office Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303; telephone (850) 488-7864.

Net Worth

[Required by Art. II, s. 8(a)(i)(1), Fla. Const.]

Report your net worth as of December 31, 2022, or a more current date, and list that date. This should be the same date used to value your assets and liabilities. In order to determine your net worth, you will need to total the value of all your assets and subtract the amount of all of your liabilities. Simply subtracting your liabilities from your assets will not result in an accurate net worth figure in most cases.

To total the value of your assets, add:

1. The aggregate value of household goods and personal effects, as reported in the Assets section of this form;
2. The value of all assets worth over \$1,000, as reported in the Assets section; and,
3. The total value of any assets worth less than \$1,000 that were not reported or included in the category of "household goods and personal effects."

To total the amount of your liabilities, add:

1. The total amount of each liability you reported in the Liabilities section of this form, except for any amounts listed in the "joint and several liabilities not reported above" portion; and,
2. The total amount of unreported liabilities (including those under \$1,000, credit card and retail installment accounts, and taxes owed).

Assets Worth More Than \$1,000

[Required by Art. II, s. 8, Fla. Const.; s. 112.3144, F.S.]

Household Goods and Personal Effects:

The value of your household goods and personal effects may be aggregated and reported as a lump sum, if their aggregate value exceeds \$1,000. The types of assets that can be reported in this manner are described on the form.

Assets Individually Values at More Than \$1,000:

Describe, and state the value of, each asset you had on the reporting date you selected for your net worth, if the asset was worth more than \$1,000 and if you have not already included that asset in the aggregate value of your household goods and personal effects. Assets include, but are not limited to, things like interests in real property; cash; stocks; bonds; certificates of deposit; interests in businesses; beneficial interests in trusts; money owed you (including, but not limited to, loans made as a candidate to your own campaign); bank accounts in which you have an ownership interest; Deferred Retirement Option Program (DROP) accounts; and the Florida Prepaid College Plan. Assets also include 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.

You are not required to disclose assets owned solely by your spouse.

How to Identify or Describe the Asset:

- Real property: Identify by providing the street address of the property. If the property has no street address, identify by describing the property's location in a manner sufficient to enable a member of the public to ascertain its location without resorting to any other source of information.
- Intangible property: Identify the type of property and the business entity or person to which or to whom it relates. **Do not list simply "stocks and bonds" or "bank accounts"**. For example, list "Stock (Williams Construction Co.)," "Bonds (Southern Water and Gas)," "Bank accounts (First National Bank)," "Smith family trust," "Promissory note and mortgage (owed by John and Jane Doe)."

How to Value Assets:

- Value each asset by its fair market value on the date used in the Net Worth section of this form.
- Jointly held assets: If you hold real or personal property jointly with another person, your interest equals your legal percentage of ownership in the property. However, assets that are held as tenants by the entirety or jointly with right of survivorship, including bank accounts held in such a manner, must be reported at 100% of their value.
- Partnerships: You are deemed to own an interest in a partnership which corresponds to your interest in the equity of that partnership.
- Trusts: You are deemed to own an interest in a trust which corresponds to your percentage interest in the trust corpus.
- Real property may be valued at its market value for tax purposes, unless a more accurate fair market value is available.
- Marketable securities which are widely traded and whose prices are generally available should be valued based upon the closing price on the valuation date.
- Accounts, notes, and loans receivable: Value at fair market value, which generally is the amount you reasonably expect to collect.
- Closely-held businesses: Use any method of valuation which in your judgment most closely approximates fair market value, such as book value, reproduction value, liquidation value, capitalized earnings value, capitalized cash flow value, or value established by "buy-out" agreements. It is suggested that the method of valuation chosen be indicated on the form.
- Life Insurance: Use cash surrender value less loans against the policy, plus accumulated dividends.
- The asset value of a leased vehicle is the vehicle's present value minus the lease residual (a number found on the lease document).

Liabilities

[Required by Art. II, s. 8, Fla. Const.; s. 112.312, F.S.]

Liabilities in Excess of \$1,000:

List the name and address of each creditor to whom you owed more than \$1,000 on the date you chose for your net worth, and list the amount you owed. Liabilities include: accounts, notes, and interest payable; debts or obligations (excluding

taxes, unless the taxes have been reduced to a judgment) to governmental entities; judgments against you, and the unpaid portion of vehicle leases.

You are not required to disclose liabilities that are solely your spouse's responsibility.

You do not have to list on the form any of the following: credit card and retail installment accounts, taxes owed (unless the taxes have been 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 partner (without personal liability) for partnership debts, or where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" on a note and are jointly liable or jointly and severally liable, then it is not a contingent liability.

How to Determine the Amount of a Liability:

- Generally, the amount of the liability is the face amount of the debt.
- The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments.
- If you are the only person obligated to satisfy a liability, 100% of the liability should be listed.
- If you are jointly and severally liable with another person or entity, which often is the case where more than one person is liable on a promissory note, you should report here only the portion of the liability that corresponds to your percentage of liability. However, if you are jointly and severally liable for a debt relating to property you own with one or more others as tenants by the entirety or jointly, with right of survivorship, report 100% of the total amount owed.
- If you are only jointly (not jointly and severally) liable with another person or entity, your share of the liability should be determined in the same way as you determined your share of jointly held assets.

Examples:

- You owe \$10,000 to a bank for student loans, \$5,000 for credit card debts, and \$60,000 with your spouse to a savings and loan for the mortgage on the home you own with your spouse. You must report the name and address of the bank (\$10,000 being the amount of that liability) and the name and address of the savings and loan (\$60,000 being the amount of this liability). The credit card debts need not be reported.
- You and your 50% business partner have a \$100,000 business loan from a bank and you both are jointly and severally liable. Report the name and address of the bank and \$50,000 as the amount of the liability. If your liability for the loan is only as a partner, without personal liability, then the loan would be a contingent liability.

Joint and Several Liabilities Not Reported Above:

List in this part of the form the amount of each debt for which you were jointly and severally liable, that is not reported in the "Liabilities in Excess of \$1,000" part of the form. Example: You and your 50% business partner have a \$100,000 business loan from a bank and you both are jointly and severally liable. Report the name and address of the bank and \$50,000 as the amount of the liability, as you reported the other 50% of the debt earlier.

Income

[Required by Art. II, s. 8, Fla. Const.]

Primary Sources of Income:

List the name of each source of income that provided you with more than \$1,000 of income during 2022, the address of that source, and the amount of income received from that source. 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.

"Income" means the same as "gross income" for federal income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples of income include: compensation for services, gross income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, distributive share of partnership gross income, and alimony if it is considered gross income under federal law, but not child support. Where income is derived from a business activity you should report the income to you, as calculated for income tax purposes, rather than the income to the business.

For purposes of reporting your income, you have the option of either completing this section or submitting a copy of your 2022 federal income tax return, including all schedules, W2s, and attachments.

Examples:

- If you owned stock in and were employed by a corporation and received more than \$1,000 of income (salary, commissions, dividends, etc.) from the company, you should list the name of the company, its address, and the total amount of income received from it.

- If you were a partner in a law firm and your distributive share of partnership gross income exceeded \$1,000, you should list the name of the firm, its address, and the amount of your distributive share.
- If you received dividend or interest income from investments in stocks and bonds, list only each individual company from which you received more than \$1,000. Do not aggregate income from all of these investments.
- If more than \$1,000 of income was gained from the sale of property, then you should list as a source of income the name of the purchaser, the purchaser's address, and the amount of gain from the sale. 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 simply as "sale of (name of company) stock," for example.
- If more than \$1,000 of your 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 the amount of income from that institution.

Secondary Sources of Income:

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 as a "Primary Source of Income." You will **not** have anything to report **unless**:

1. You owned (either directly or indirectly in the form of an equitable or beneficial interest) during the disclosure period, more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, limited partnership, LLC, proprietorship, joint venture, trust, firm, etc., doing business in Florida); and
2. You received more than \$1,000 in gross income from that business entity during the period.

If your ownership and gross income exceeded the two thresholds listed above, 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, the source's principal business activity, and the name of the business entity in which you owned an interest. You do not have to list the amount of income the business derived from that major source of income.

Examples:

- You are the sole proprietor of a dry cleaning business, from which you received more than \$1,000 in gross income last year. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of your business, 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 gross partnership income exceeded \$1,000. You should list the name of the partnership, the name of 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.

Interests in Specified Businesses

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

The types of businesses covered in this section 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.

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 2022, 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). Also, if you own(ed) more than a 5% interest in the business, as described above, you must indicate that fact and describe the nature of your interest.

Training Certification

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

If you are a Constitutional or elected municipal officer 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.

Candidate Forms and Publications Information

FORMS

The forms of interest to candidates that can be found on the Candidate DSDE Forms page on our Okaloosa County Supervisor of Elections website:

<https://www.voteokaloosa.gov/> include but are not limited to the following:

- ***Appointment of Campaign Treasurer (DS-DE 9)***
- ***Loyalty Oath (DS-DE 24)***
- ***Statement of Candidate (DS-DE 84)***
- ***Campaign Treasurer's Report (DS-DE 12)***
- ***Waiver of Report (DS-DE 87)***
- ***Candidate Petition Form (DS-DE 104)***
- ***How to File Financial Reports Online***
- ***Download Election Files***

If you don't see the form you are looking for in the above list, please visit the Okaloosa County Supervisor of Elections website and take a look. You will find a number of other forms there.

If you are looking for Financial Disclosure Forms, they can be found on the Florida Commission on Ethics website: <http://www.ethics.state.fl.us/forms.html>. The Florida Commission on Ethics website can also be reached through our Okaloosa County Supervisor of Elections website:

<https://www.voteokaloosa.gov/>. Click on HELPFUL LINKS --> Florida Commission on Ethics.

Once on the Florida Commission on Ethics website, click on Forms to find:

- ***Form 1 (Statement of Financial Interests)***
- ***Form 1F (Final Statement of Financial Interests)***
- ***Form 6 (Full and Public Disclosure of Financial Interests)***

***** Reminder: Forms are year-specific so make sure you get the right one! *****

PUBLICATIONS

Publications contain a lot of useful information for candidates and committees. These publications can be found on the Florida Division of Elections website:

<http://election.dos.state.fl.us/publications/publications.shtml>. As stated above, the Florida Division of Elections website can also be reached through our Okaloosa County Supervisor of Elections website: <https://www.voteokaloosa.gov/>. Click on HELPFUL LINKS → Florida Division of Elections.

Once you are on the Florida Division of Elections website, click on Forms & Publications →

Publications or click on Opinions/Rules/Laws/Directives → Florida Laws and Procedures to find a number of useful publications including:

- ***Candidate and Campaign Treasurer Handbook***
- ***Candidate Petition Handbook***
- ***Election Dates to Remember***
- ***Election Laws (INCLUDES CHAPTER 106 – CAMPAIGN FINANCING)***

OKALOOSA COUNTY SUPERVISOR OF ELECTIONS DATA PRICE LIST 4/13/17

Voter Registration Records are public records except for Driver's License and Social Security Number

Lists Of Active Registered Voters Include:

Mailing Address	Date of Registration	Race*	Sex*
Residence Address	Party	Voting History (available on Request)	
Date of Birth	Precinct and Districts		

****This information is accurate only through December 1994. Sex and race are optional effective January 1995.***

Lists And Labels May Include All Of The Following Or May Be Sorted To:

- Voters of specific parties
- Voters with out-of-county mailing addresses
- Voters with in-county mailing addresses
- Voters who have requested Vote by Mail ballots
 - Vote by Mail addresses available to only Candidates & Parties
- Voters in all or specific precincts
- Voters in specific districts (FL House, FL Senate, County, City, School, Fire or Special)
- New registrations in a specific date range
- Electors who voted in a specific election
- Precinct walk lists (Residence Address by Precinct)

Services & Materials Rates

Voter lists	27 – 52 names per page, \$.15 per page
Voter labels.....	\$.05 per label (we supply labels)
CD.....	\$5.00 for full list or list over 10 M
Emailed files (under 10 M).....	No Charge
Verification of Signatures	\$.10 per name

Also Available:

Past election data, Voter statistics, Candidate Information	
Copies.....	\$.15 one-sided, \$.20 two-sided copies
FAX	\$1.00 per page
Chapters 99, 105 & 106 Florida Statutes Booklet.....	No charge**
Florida Election Code.....	No charge**
Candidate Handbook	No charge**
GIS Large Map.....	\$10.00***

*****Available online to download or print through Florida Division of Elections website.***

<http://dos.myflorida.com/elections/forms-publications/publications/>

******Countywide District Maps available online <http://gis.okaloosaf1.com/gis/index.php/maps/election>***

All materials and services **must be paid for when received or in advance if mailing.**

All materials and services furnished to a candidate **should be paid for by campaign account check.**

Make checks payable to: Supervisor of Elections, Okaloosa County.

RULES AND REGULATIONS FOR CHECKING RECORDS

Because space is limited in our office for candidates desiring to check the voting records, you are requested to abide by the following rules in the interest of fairness to all:

1. Records may only be checked under the supervision of a staff member. For this reason, we ask that you make an appointment in advance or be kind enough to wait until personnel/space become available.
2. The area available for checking records will be on a first-come, first-served basis for walk-ins. Candidates themselves will be given first priority and volunteers second. For example, if a candidate is using all the spaces available with volunteers, and another candidate needs space to work, one of the volunteers will have to relinquish his space. Should a person using a space leave, he loses his space if others are waiting.
3. Because of the real possibility of records being misfiled, misplaced, or misalphabetized, we ask that you do not remove records from the trays or folders.
4. When two or more volunteers/candidates are working together, calling names out loud or other talking may interfere with the office work and employees' concentration.
5. All candidates/volunteers must follow the office rules concerning appropriate dress, no smoking or eating, etc. Other walk-in customers are not aware as to who are workers and who are guests.

We are here to serve you to the utmost of our ability and will do our best to be cooperative and helpful as possible. Please do not hesitate to ask any questions concerning these procedures or seek additional assistance.



2024 Calendar of Reporting Dates

For 2024 Candidates

<u>Cover Period</u>	<u>Report Code</u>	<u>Due Date</u>
01/01/2024- 03/31/2024	2024 Q1	04/10/2024
04/01/2024-05/31/2024	2024 Q2	06/10/2024
06/01/2024-06/14/2024	2024 P1	06/21/2024
06/15/2024-06/28/2024	2024 P2	07/05/2024
06/29/2024-07/12/2024	2024 P3	07/19/2024
07/13/2024-07/19/2024	2024 P4	07/26/2024
07/20/2024-07/26/2024	2024 P5	08/02/2024
07/27/2024-08/02/2024	2024 P6	08/09/2024
08/03/2024-08/15/2024	2024 P7	08/16/2024
08/16/2024-08/23/2024	2024 G1	08/30/2024
08/24/2024-09/06/2024	2024 G2	09/13/2024
09/07/2024-09/20/2024	2024 G3	09/27/2024
09/21/2024-10/04/2024	2024 G4	10/11/2024
10/05/2024-10/18/2024	2024 G5	10/25/2024
10/19/2024-10/13/2024	2024 G6	11/01/2024

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) _____
Name

(2) _____
Address (number and street)

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: _____

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From ____ / ____ / ____ To ____ / ____ / ____ Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ ____ , ____ , ____ . ____

Loans \$ ____ , ____ , ____ . ____

Total Monetary \$ ____ , ____ , ____ . ____

In-Kind \$ ____ , ____ , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ ____ , ____ , ____ . ____

Transfers to Office Account \$ ____ , ____ , ____ . ____

Total Monetary \$ ____ , ____ , ____ . ____

(8) Other Distributions

\$ ____ , ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ ____ , ____ , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ ____ , ____ , ____ . ____

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) _____

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____

Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _____ (2) I.D. Number _____

(3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (4) Page ____ of ____

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _____

(2) I.D. Number _____

(3) Cover Period ____/____/____ through ____/____/____

(4) Page _____ of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

OFFICE USE ONLY

Name

Office Sought

Address

City

State

Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #

M _____

Indicate report #

P _____

Indicate report #

G _____

Indicate report type and # as applicable:

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

_____ THROUGH _____

X

Signature

Date

X

Signature

Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

COMMON MISTAKES MADE BY CANDIDATES AND CAMPAIGN TREASURERS

- ◆ Accepting anonymous contributions, such as passing the hat or selling tickets for fund raisers without getting the required information from contributors.
- ◆ Failing to properly mark political disclaimers on political advertisements, campaign literature and ads.
- ◆ Accepting contributions prior to filing an Appointment of Campaign Treasurer and Designation of Campaign Depository form with the appropriate filing officer.
- ◆ Filing Campaign Treasurer Reports late.
- ◆ Allowing unauthorized individuals to sign campaign reports.
- ◆ Showing a deficit in campaign contribution and expenditure reports.
- ◆ Taking contributions in excess of legal limitations.
- ◆ Failing to notify the filing officer of changes in treasurers, addresses or other required information.
- ◆ Making donations to charitable organizations from campaign funds before the candidate is elected, eliminated, withdrawn or elected unopposed.
- ◆ Accepting contributions to cover outstanding expenses after the election.

Mary Esther Sign Ordinances

Political signs are to be temporary signs.

Sec. 16.03.00 PROHIBITED SIGNS.

- (g) Prohibited vehicle signs.
- (j) Any sign within a sight visibility triangle that obstructs a clear view of pedestrian or vehicular traffic.
- (k) Any sign in the public right of way, other than Traffic Control Device Signs, bus stop informational signs, warning signs or safety signs.
- (n) Any sign located on real property without the permission of the property owner.

Section 16.04.00 ALLOWED SIGNS; ALL DISTRICTS

- (i) **Temporary election signs.** For each parcel, one election sign for each candidate and each issue may be displayed. An election sign may be displayed as an attached sign or as a freestanding sign. On parcels that are in residential use, the election sign shall not exceed four (4) square feet in sign area, and, if the election sign is displayed as a freestanding sign on the parcel, the election sign shall not exceed four (4) feet in height. If the election sign is displayed as a freestanding sign on the parcel, the election sign shall be set back at least ten (10) feet from all property lines and must be setback at least ten (10) feet from any curb or, if there is no curb, from the edge of pavement. An election sign shall be removed within two (2) calendar days following the election to which it pertains. On parcels that are in commercial use, the election sign shall not exceed six (6) square feet in sign area and, if the election sign is displayed as a freestanding sign on the parcel, the election sign shall not exceed six (6) feet in height.

Please direct any questions you have to the Mary Esther Code Enforcement Division Director.

(Office) 850-234-3566 Ext 16
code@cityofmaryesther.com



Florida Department of Transportation

RON DESANTIS
GOVERNOR

605 Suwannee Street
Tallahassee, FL 32399-0450

JARED W. PERDUE, P.E.
SECRETARY

November 8, 2023

Notice to candidates for election to offices in the State of Florida

The Department of Transportation's Office of Right of Way would like to remind you of State Law regarding political campaign signs:

- (1) Signs placed on the state rights of way — Political campaign signs may not be placed in the right of way of any state or national highway [Chapter 479.11(8), Florida Statutes]. A joint effort by the Florida Department of Transportation and the Florida Highway Patrol produced a brochure explaining that the unauthorized use of the public right of way is prohibited by Florida law. This brochure further outlines how the right of way is regulated and how to recognize the location of the right of way line. The brochure is available on our website, <http://www.fdot.gov/rightofway/>. Please feel free to print and copy the brochure for distribution. We recommend campaigns make this brochure required reading for volunteers who post candidate signage.
- (2) Signs placed on private property — Temporary political campaign signs may be placed on private property with the permission of the owner. Such signs do not require a permit under state law.

Please advise your campaign workers to ensure that signs are placed on private property. Signs placed on the state rights of way must be picked up by Department staff and placed in one of the Department's maintenance yards. We will make every effort to place a courtesy call to your campaign office advising of sign removal and the location of the maintenance yard where the signs have been stored.


If you have any questions regarding this issue, please contact the Department's Outdoor Advertising Office in Tallahassee at (850) 414-4569.

Sincerely,

A handwritten signature in blue ink, appearing to read "Scott Foltz", written over a white background.

Scott Foltz, Director
Office of Right of Way



A Touchstone Energy
Cooperative 

RECEIVED
SUPERVISOR OF ELECTIONS

2018 MAY -2 P 12:54

Campaign Year 2018

Dear Candidate;

On behalf of the management and staff of Choctawhatchee Electric Cooperative (CHELCO), we congratulate you on your decision to run for political office. I am sure that over the next few months you will travel many miles, meet many people and make many personal sacrifices during your campaign. Again, we congratulate you for your willingness to serve and wish you the best of luck.

Let me take this opportunity to remind you that absolutely no campaign materials should ever be placed on any utility poles whether they are located on public or private right-of-way. In the interest of job safety, our crews will be instructed to remove and dispose of any material attached to any CHELCO property.

We greatly appreciate your cooperation and assistance in this matter.

Thank you

Steve Rhodes

Chief Executive Officer

Important Notice

TO: Candidates

FROM: Paul Lux
Supervisor of Elections

RE: Electronic Tabulation Equipment Testing – 2024 Primary Election

The electronic tabulation equipment which will be in service for the August 20, 2024 Primary election will be tested on:

Thursday, August 1, 2024 8:30 a.m.
(Early Voting & Precinct Equipment)

The L&A test will be held at the **Supervisor of Elections Warehouse, 5479 Old Bethel Road, Crestview, FL 32539**, and will be legally advertised no later than 48 hours prior to the testing date and time.

Important Notice

TO: Candidates
FROM: Paul Lux
Supervisor of Elections
RE: Electronic Tabulation Equipment Testing – 2024 Primary Election

The electronic tabulation equipment which will be in service for the August 20, 2024 Primary Election will be tested on:

August 1, 2024 8:30 a.m. Supervisor of Elections Warehouse
(Early Voting & Precinct Equipment) 5479 Old Bethel Rd.
Crestview, FL 32539

I acknowledge that I have received a copy of the above listed notice concerning the electronic tabulation equipment testing.

Signature of the Candidate

Date

Office Sought

Qualifying Officer



Okaloosa County Supervisor of Elections

CANDIDATE QUALIFYING PETITION FOR _____

Pursuant to the _____ charter and election ordinance and the Election Code of the State of Florida (Chap 97-106 F.S.), we nominate _____ as a candidate for the office of _____.

This election is to be held _____. We, the undersigned, are qualified electors of the City/Town of _____, County of Okaloosa and State of Florida.

NUMBER	DATE	NAME (Please print legibly)	OKALOOSA COUNTY RESIDENCE ADDRESS
1.		Print:	
		Signature:	
2.		Print:	
		Signature:	
3.		Print:	
		Signature:	
4.		Print:	
		Signature:	
5.		Print:	
		Signature:	
6.		Print:	
		Signature	
7.		Print:	
		Signature:	
8.		Print:	
		Signature:	

I do solemnly swear that I witnessed each person sign the above petition on the date indicated.

_____ Signature of Circulator

**PLEASE BRING THE FOLLOWING PAPERS TO
THE SUPERVISOR OF ELECTIONS OFFICE DURING
QUALIFYING NOON - Monday, June 10- Noon - Friday, June 14, 2024**

- APPOINTMENT OF CAMPAIGN TREASURER
- STATEMENT OF CANDIDATE
- STATEMENT OF CANDIDATE RECEIPT
- CANDIDATE OATH (NOTARIZED)
- FORM 6
- EQUIPMENT TEST NOTICE RECEIPT
- PETITIONS AND QUALIFYING FEE

Mary Esther City Council
MUNICIPAL QUALIFYING CHECKLIST
NOON, JUNE 10 – NOON, JUNE 14, 2024

Candidate's Name _____

Office Sought _____

- Appointment of Campaign Treasurer
(DS-DE 9)
- Statement of Candidate (DS-DE 84)
- Statement of Candidate Receipt
- Candidate Oath (**DS-DE 302NP**) NON-PARTISAN
- Form 6 Financial Disclosure
- Equipment Testing Notice
- Check (*written from Campaign Account*)
- \$42 – **City Council**
- Petition 5

SOE or Deputy _____

Note: Timestamp all qualifying paperwork

