

**OFFICE:**

**SUPERVISOR OF ELECTIONS**

Term of office is four years.

Take office the first Tuesday after the first Monday in January following the election. [F.S. 98.015(1)]

**WHERE TO QUALIFY:** Supervisor of Election's Offices

Buddy Brackin Bldg.  
302 N. Wilson St., Suite 102  
Crestview, FL 32536-3440

Okaloosa County Administration Bldg.  
1250 Eglin Parkway, Suite 103  
Shalimar, FL 32579

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**ANNUAL SALARY:** \$135,243

**QUALIFYING FEE:** Payable to Supervisor of Elections with a Candidate's Campaign Account Check

Major party candidates; Rep. or Dem. - 6% of annual salary - **\$8,114.58**

Minor Party Candidate – 4% of annual salary - \$5,409.72. If the Political Party has an assessment an additional fee may be required.

Independent Candidate – 4% of annual salary - \$5,409.72

*OR* Qualifying for office may be done by obtaining 1,355 valid petition signatures.

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**QUALIFYING FORMS AND REQUIREMENTS:**

DS-DE 9	Appointment of Campaign Treasurer
CE Form 6	Full Public Disclosure of Financial Interests
CE Form 10	Gifts Disclosure (if applicable)
DS-DE 301SL	Candidate Oath
DS-DE 84	Statement of Candidate (Must be received in our office within 10 days after submitting Appointment of Campaign Treasurer)

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**DATES:**

**Primary Election – August 18, 2020**  
**General Election – November 3, 2020**  
**Qualifying - Noon, June 8 - Noon, June 12, 2020**

**Qualifying paperwork may be submitted to our office up to 14 days prior to qualifying week.**



## 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 301SL CANDIDATE OATH – CANDIDATE WITH PARTY AFFILIATION** – 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 FINANACIAL INTERESTS** – Instructions are provided in the packet for completing and filing this document. This document also 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.

**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 August 30, 2016 Primary election. This can be found in your packet. We have you sign the Equipment Test Notice Receipt acknowledging you have received the invitation.

**PETITIONS OR QUALIFYING FEE** – If you have successfully completed the petition process we have your certificate of completion in our office. If you did not complete the petition process you are required to pay the qualifying fee. The information sheet on the front of your qualifying packet indicates the amount of the filing fee for the office you are running for. The qualifying fee must be paid with a campaign account check.

The other documents in the qualifying packet are informational. Please take the time to look them over. 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 reports electronically via our website.





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](http://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 qualifying 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)

3. Address (include post office box or street, city, state, zip code)

4. Telephone

5. E-mail address

(      )

6. **Office sought** (include district, circuit, group number)

7. **If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate.

8. **If a candidate for a partisan office, check block and fill in name of party as applicable:** My intent is to run as a

Write-In     No Party Affiliation     \_\_\_\_\_ Party candidate.

9. **I have appointed the following person to act as my**     Campaign Treasurer     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

11. Mailing Address

12. Telephone

(      )

13. City

14. County

15. State

16. Zip Code

17. E-mail address

18. **I have designated the following bank as my**     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 APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF 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 block)

I, \_\_\_\_\_, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

**X**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Campaign Treasurer or Deputy Treasurer





**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 - STATE AND LOCAL PARTISAN OFFICE

**Check applicable one:**

Candidate with party affiliation  
 Candidate with no party affiliation  
 Write-in candidate

OFFICE USE ONLY

## Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, \_\_\_\_\_  
*(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)*

am a candidate for the office of \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
*(Office) (District #) (Circuit #)*

\_\_\_\_\_ ; I am a qualified elector of \_\_\_\_\_ County, Florida; I am qualified  
*(Group or Seat #)*

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 Party

(Section 99.021(1)(b), Florida Statutes)

*(Complete Statement of Party only if you are seeking to qualify for nomination as a party candidate.)*

I am a member of the \_\_\_\_\_ Party; I have not been a registered member of any other political party for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member.

**Candidate's Florida Voter Registration Number** (located on your voter information card): \_\_\_\_\_

**Phonetic spelling for audio ballot:** Print 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 2 of this form): *[Not applicable to write-in candidates.]*

\_\_\_\_\_

**X** \_\_\_\_\_ ( ) \_\_\_\_\_

**Signature of Candidate** Telephone Number Email Address

Address 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 this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_\_.

Personally Known: \_\_\_\_\_ or Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_

## Compound Last Names

If your last name consists of two or more names and has no hyphen, check the box in the Candidate Oath section. If you fail to check the box, your name will be listed with the name appearing last on the line. Example: John Jones Smith – If the last name has no hyphen and you do not check the box, the last name on the ballot would be “Smith”. If you check the box, your last name would be listed on the ballot as “Jones Smith.” If you have a hyphen within your last name, the last name would be listed as “Jones-Smith”.

### Guide for Designating Phonetic Spelling of Candidate’s Name for Audio Ballot

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

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

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.***

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

**OF FINANCIAL INTERESTS**

**FOR OFFICE USE ONLY:**

LAST NAME — FIRST NAME — MIDDLE NAME:

MAILING ADDRESS:

CITY : ZIP : COUNTY :

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

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, 2019 or a more current date. [Note: Net worth is not calculated by subtracting your *reported* liabilities from your *reported* assets, so please see the instructions on page 3.]

My net worth as of \_\_\_\_\_, 20 \_\_\_\_ was \$ \_\_\_\_\_.

**PART B -- ASSETS**

**HOUSEHOLD GOODS AND PERSONAL EFFECTS:**

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ \_\_\_\_\_

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

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET

**PART C -- LIABILITIES**

**LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

**JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

**PART D -- INCOME**

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2019 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

I elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments.  
 [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]

**PRIMARY SOURCES OF INCOME (See instructions on page 5):**

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT

**SECONDARY SOURCES OF INCOME** [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

**PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]**

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
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 F - TRAINING**

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

**I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.**

**OATH**

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

**STATE OF FLORIDA**

**COUNTY OF** \_\_\_\_\_

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

physical presence or  online notarization, this \_\_\_\_\_ day of

\_\_\_\_\_, 20\_\_ by \_\_\_\_\_.

\_\_\_\_\_  
 (Signature of Notary Public--State of Florida)

\_\_\_\_\_  
 (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE**

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 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.**

**IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE**



# NOTICE

Annual Full and Public Disclosure of Financial Interests is 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. 112.3144, 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

### WHAT TO FILE

File only the first sheet (pages 1 and 2). **Originals are required. Photocopies, faxed copies and emailed copies will not be accepted.** A candidate who has filed Form 6 for 2019 with the Commission, prior to qualifying, may file a copy of that Form 6 at the time of qualifying.

### WHERE TO FILE

**Officeholders:** Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303;

**Candidates:** The officer before whom they qualify. **If a Form 6 is filed with a qualifying officer, it need not also be filed with the Commission.**

### WHEN TO FILE

**Officeholders:** No later than July 1, 2020.

**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.

## INSTRUCTIONS FOR COMPLETING FORM 6:

### **INTRODUCTORY INFORMATION** (At 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](http://www.ethics.state.fl.us).

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

**OFFICE OR POSITION HELD OR SOUGHT:** The title of the office or position you hold, are seeking, or held as of December 31, 2019, even if you have since left that position. If you are a candidate, check the box below your name and address.

**PUBLIC RECORD:** The disclosure form and everything attached to it is a public record and is required by law to be posted to the Commission's website. **Your Social Security number and bank account and credit card numbers are not required and you should redact them 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 or other information is exempt from disclosure, the Commission will maintain that confidentiality **if you submit a written request.**

### **PART A — NET WORTH**

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

Report your net worth as of December 31, 2019, 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 the liabilities reported in Part C from the assets reported in Part B 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 Part B of this form;
- (2) The value of all assets worth over \$1,000, as reported in Part B; 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 Part C 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).

(CONTINUED on page 4) 

## PART B — 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 VALUED 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 in Part A, 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; bank accounts; 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 Part A for your net worth.

— 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 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 appraisal of its 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).

## PART C — 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 in Part A, 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.

(CONTINUED on page 5) 

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.

**PART D — INCOME**

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

As noted on the form, you have the option of either completing Part D of the form or attaching a copy of your complete 2019 federal income tax return, including all schedules, W2's and attachments, with Form 6, or. If you do not attach your tax return, you must complete Part D.

**PRIMARY SOURCES OF INCOME:**

List the name of each source of income that provided you with more than \$1,000 of income during 2019, 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, 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.

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.

(CONTINUED on page 6) 

## **PART E – 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 2019, 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.

## **PART F – 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.

(End of Instructions.)

## **OTHER FORMS YOU MAY NEED TO FILE IN ORDER TO COMPLY WITH THE ETHICS LAWS**

In addition to filing Form 6, you *may* be required to file one or more of the special purpose forms listed below, depending on your particular position, business activities, or interests. As it is your duty to obtain and file any of the special purpose forms which may be applicable to you, you should carefully read the brief description of each form to determine whether it applies.

### **Form 6F — Final Full and Public Disclosure of Financial**

**Interests:** Required of elected constitutional officers and others who must file financial disclosure using Form 6; to be filed within 60 days after leaving office or employment. This form is used to report financial interests between January 1st of the last year of office or employment and the last day of office or employment. [s. 112.3144, F.S.]

### **Form 6X — Amended Full and Public Disclosure of Financial**

**Interests:** To be used by elected constitutional officers and others who must file financial disclosure using Form 6 or 6F to correct mistakes on previously filed form. [s. 112.3144, F.S.]

### **Form 2 — Quarterly Client Disclosure:**

Required of elected constitutional officers, local officers, state officers, and specified state employees to disclose the names of clients represented for compensation by themselves, or a partner or associate before agencies at the same level of government as they serve. The form should be filed by the end of the calendar quarter (March 31, June 30, Sept. 30, Dec. 31) following the calendar quarter in which a reportable representation was made. [s. 112.3145, F.S.]

### **Form 9 — Quarterly Gift Disclosure:**

Required of elected constitutional officers and others who must file financial disclosure using Form 1 or 6 (as well as State procurement employees) to report gifts worth more than \$100. The form should be filed by the end of the calendar quarter (March 31, June 30, September 30, or December 31) following the calendar quarter in which the gift was received. [s. 112.3148, F.S.]

### **Form 3A — Statement of Interest in Competitive Bid for Public Business**

### **Form 4A — Disclosure of Business Transaction, Relationship, or Interest**

### **Form 8A — Memorandum of Voting Conflict for State Officers**

### **Form 8B — Memorandum of Voting Conflict for County, Municipal, and Other Local Public Officers**

### **Form 10 — Annual Disclosure of Gifts from Governmental Entities and Direct Support Organizations and Honorarium Event Related Expenses**

**Copies of these forms** are available from the Supervisor of Elections in your county; from 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; and at the Commission's website: [www.ethics.state.fl.us](http://www.ethics.state.fl.us)

**Questions** about any of these forms 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.

# 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:

<http://www.govote-okaloosa.com> 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:

<http://www.govote-okaloosa.com>. 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:

<http://www.govote-okaloosa.com>. 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.





## 2020 Calendar of Reporting Dates

<u>Cover Period</u>	<u>Report Code</u>	<u>Due Date</u>
12/01/19 – 12/31/19	2019 M12	01/10/2020
01/01/20 – 01/31/20	2020 M1	02/10/2020
02/01/20 – 02/29/20	2020 M2	03/10/2020
03/01/20 – 03/31/20	2020 M3	04/10/2020
04/01/20 – 04/30/20	2020 M4	05/11/2020
05/01/20 – 05/31/20	2020 M5	06/10/2020
06/01/20 – 06/12/20	2020 P1	06/19/2020
06/13/20 – 06/26/20	2020 P2	07/03/2020
06/27/20 – 07/10/20	2020 P3	07/17/2020
07/11/20 – 07/17/20	2020 P4	07/24/2020
07/18/20 – 07/24/20	2020 P5	07/31/2020
07/25/20 – 07/31/20	2020 P6	08/07/2020
08/01/20 – 08/13/20	2020 P7	08/14/2020



# 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.







# Florida Department of Transportation

RICK SCOTT  
GOVERNOR

605 Suwannee Street  
Tallahassee, FL 32399-0450

ANANTH PRASAD, P.E.  
SECRETARY

September 23, 2011

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

We 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). Through a joint effort of the Florida Department of Transportation and the Florida Highway Patrol, a brochure explaining that the unauthorized use of the public rights of way is prohibited by Florida law and further outlining why the right of way is regulated and how to know the location of the right of way line is available through our office or from your local Supervisor of Election. We recommend this brochure be given to your campaign volunteers.
- (2) Signs placed on private property – Temporary political campaign signs may be placed on private property with the permission of the owner, and 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, because we know your campaign signage is expensive.

If you have any questions regarding this issue, please contact the Department's Outdoor Advertising Office in Tallahassee at (850) 414-4545. If you would like copies of the encroachment brochure, please e-mail your address and quantity needed to [juanice.hughes@dot.state.fl.us](mailto:juanice.hughes@dot.state.fl.us).

*Outdoor Advertising  
District Three Inspector  
Josh Rudd  
850-544-0105  
JS:jh*

Sincerely,

  
A.J. Jim Spalla, Director  
Office of Right of Way



**THE TOWN OF CINCO BAYOU SIGN ORDINANCES**  
**ORDINANCE NO. 200 83-7**

83-7. Permitted temporary signs.

*Generally.* The town recognizes that, by their nature, some signs are intended from their construction to serve a temporary purpose only. Such signs shall be identified as temporary sign and shall not require a permit from the town, provided that they satisfy the restrictions imposed by this section and other relevant parts of this code.

*Sign types allowed.* A temporary sign may be a ground or building sign, but may not be an electric sign. A temporary sign must be constructed of rigid material.

***Removal of illegal temporary signs.*** Any temporary sign not complying with the requirements of this section is illegal and subject to immediate removal.

*Permissible temporary signs.* Temporary signs as follows shall be allowed, subject to the provisions of this code:

- A. Real Estate sign not exceeding 32 square feet of sign face area or 8 feet in height
- B. A Grand Opening sign not exceeding 20 square feet of sign face area or 8 feet in height, provided that said sign shall not be displayed for more than 14 days during 12 consecutive calendar months.
- C. A Construction sign not exceeding 20 square feet of sign face area or 8 feet in height. Such sign shall not be displayed more than 60 days prior to the beginning of actual construction of the project, and shall be removed no later than the date of the issuance of a certificate of occupancy for all or any portion of the project. If a sign is displayed pursuant to this section, but construction is not initiated within 60 days after the sign is displayed, or if construction is discontinued for a period of more than 60 days, the sign shall be removed, pending the initiation or construction activities.
- D. A sign for a premises that has no permanent sign provided that such temporary sign shall not exceed 32 square feet in sign face area nor 8 feet in height. Such sign may be displayed for a period of 60 days or until installation of a permanent sign, whichever shall occur first.
- E. Temporary Non-commercial signs displayed before, during or after an event or occurrence scheduled to take place at a specified time and place. Such signs are permitted in all zoning districts and shall not exceed 32 square feet in sign face area or 8 feet in height. All such signs shall be removed within 21 days after the end of the scheduled event or occurrence to which they relate.



## **Crestview, Florida – Code of Ordinances**

### **Sec. 102-304. - Permitted temporary signs.**

(a) *Where allowed.* Temporary signs are allowed throughout the city on private property, subject to the restrictions imposed by this section and other relevant parts of this article.

(b) *Sign types allowed.* A temporary sign may be a ground or building sign to include banners and sandwich or sidewalk signs, and snipe signs in commercially zoned property in major arterial roads, but may not be an electric sign.

(c) *Removal of illegal temporary signs.* Any temporary sign not complying with the requirements of this section is illegal and subject to immediate removal.

(d) *Restrictions on content of temporary signs.* A temporary sign may display any message so long as it is not:

(1) Harmful to minors.

(2) Advertising, except that advertising for the following purposes may be displayed:

a. To indicate that an owner, either personally or through an agent, is actively attempting to sell, rent or lease the property on which the sign is located.

b. To indicate the grand opening of a business or other activity, to include special sales or promotion of events or activities on the property on which the sign is located. Such message may be displayed for a period not exceeding 15 days.

c. To identify construction in progress on the property on which the sign is located. Such message shall not be displayed more than 60 days prior to the beginning of actual construction of the project, and shall be removed when construction is completed. If a message is displayed pursuant to this section, but construction is not initiated within 60 days after the message is displayed, or if construction is discontinued for a period of more than 60 days, the message shall be removed, pending initiation or continuation of construction activities.

d. To indicate the existence of a new business, or a business in a new location, if such business has no permanent signs. Such message may be displayed on the property on which the sign is located for a period of not more than 60 days or until installation of permanent signs, whichever shall occur first.

(e) *Permissible size, height and number of temporary signs.*

(1) *One-family and two-family residences.* A parcel on which is located a single one-family or two-family residence may display not more than two temporary signs with an aggregate sign area of not more than ten square feet. No individual sign shall exceed six square feet nor exceed eight feet in height.

(2) *Three-family and four-family residences.* A parcel on which is located a single three-family or four-family residence may display not more than four temporary signs with an aggregate sign area of not more than ten square feet. No individual sign shall exceed six square feet nor exceed eight feet in height.

(3) *Major arterials.*

a. Commercial zoned properties fronting major arterials may display a maximum number of ten snipe signs. No individual snipe sign will exceed four square feet. All signs will be displayed on private property and will not obstruct the vision triangle or create a public safety hazard.

1. Requests for temporary snipe signs will be processed through the administrative services department on forms provided by the department.

2. Each snipe sign will require a label affixed to the sign face. A label will be provided for each snipe sign at the time a permit is issued. Each label will include at a minimum: name of permit holder, permit number, beginning date, expiration date and authorization. Permits will be valid for a maximum of 14 days.

b. Commercial zoned properties fronting major arterials may display a maximum number of banner, sandwich or A-frame signs equal to one square foot of signage per ten feet of frontage up to a maximum of 100 square feet. No individual sign shall exceed 24 square feet nor exceed ten feet in height and must be displayed on the property on which the business or event advertised is located. All signs will be displayed on private property and will not obstruct the vision triangle or create a public safety hazard.

1. Banner, sandwich or a frame signs may be posted on private property for the duration of the special event for which they are used, but no longer than 15 days.

(4) *On all other parcels.* All other parcels may display one square foot of temporary signage per ten feet of frontage up to a maximum of 100 square feet. No individual sign shall exceed 60 square feet nor exceed ten feet in height. Signs must be spaced at least 100 feet apart. Sign must be displayed on the property on which the business or event advertised is located. (Ord. No. 897, § 3, 10-14-96; Ord. No. 979, § 2, 6-14-99; Ord. No. 1055, § 4, 3-12-01; Ord. No. 1142, § 2, 4-12-04; Ord. No. 1179, § 2, 6-13-05)



## Mary Esther Election Sign Ordinance

### 16.04.00 - ALLOWED **SIGNS**; ALL DISTRICTS

*Temporary election signs.* For each parcel, one (1) 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. A sign permit is required for a temporary election sign.





## **CITY OF VALPARAISO POLITICAL SIGN ORDINANCE**

Sec. 126-9. Prohibited and restricted signs.

(6) *Political signs.* Political signs will be placed at the maximum distance from the center line of the road, street, lane, avenue or highway, and within the outside edge of the right-of-way. All signs placed other than as specified above will be removed at owner's expense. Political signs are permitted only when displayed during the period of an election campaign. All such signs shall be removed within ten days after the election. A \$100.00 deposit is required before the placement of any political signs, unless applicant can show proof that he/she is indigent, in which case the deposit will be waived. If such signs are not removed within the required ten-day period, then the city has the right to retain a portion or all of the deposit for cleanup fees.





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 – 2020 Primary Election

The electronic tabulation equipment which will be in service for the August 18, 2020 Primary election will be tested on:

Wednesday, July 29, 2020 8:00 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 – 2020 Primary Election

The electronic tabulation equipment which will be in service for the August 18, 2020 Primary Election will be tested on:

July 29, 2020      8:00 a.m.      Supervisor of Elections Warehouse  
(Early Voting & Precinct Equipment)      5479 Old Bethel Rd.  
Crestview, FL 32539

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

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**Signature of the Candidate**

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**Date**

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**Office Sought**

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**Qualifying Officer**



Okaloosa County Supervisor of Elections





## Hatch Act for State and Local Employees

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The Hatch Act applies to executive branch state and local employees who are principally employed in connection with programs financed in whole or in part by loans or grants made by the United States or a federal agency. Employees who work for educational or research institutions which are supported in whole or in part by a State or political subdivision of the State are not covered by the provisions of the Hatch Act.

Employees of private nonprofit organizations are covered by the Hatch Act only if the statute through which the organization receives its federal funds contains language which states that the organization shall be considered to be a state or local agency for purposes of the Hatch Act, e.g., Headstart and Community Service Block Grant statutes.

An employee's conduct is also subject to the laws of the state and the regulations of the employing agency. Additionally, employees should be aware that the prohibitions of the Hatch Act are not affected by state or local laws.

### **Permitted Activities**

Covered state and local employees **may**-

- run for public office in nonpartisan elections
- campaign for and hold office in political clubs and organizations
- actively campaign for candidates for public office in partisan and nonpartisan elections
- contribute money to political organizations and attend political fundraising functions

### **Prohibited Activities**

Covered state and local employees **may not**-

- be candidates for public office in a partisan election
- use official authority or influence to interfere with or affect the results of an election or nomination
- directly or indirectly coerce contributions from subordinates in support of a political party or candidate

### **Penalties for Violating the Hatch Act**

If the Merit Systems Protection Board finds that the violation warrants dismissal from employment, the employing agency must either remove the employee or forfeit a portion of the federal assistance equal to two years salary of the employee. If the Board finds the violation does not warrant the employee's removal, no penalty is imposed.

**Covered employees** are those whose principal employment is with a state, county or municipal executive agency, and whose job duties are "in connection with" programs financed in whole or in part by loans or grants made by the United States or an agency thereof. 5 U.S.C.

§ 1501(4). Employees are subject to the Act if, as a normal and foreseeable incident of their principal employment, they perform duties in connection with the federally financed activities.

In re Hutchins, 2 P.A.R. 160, 164 (1944); Special Counsel v. Gallagher, 44 M.S.P.R. 57 (1990).

Coverage is not dependent on the source of an employee's salary, nor is it dependent upon whether the employee actually administers the funds or has policy duties with respect to them.

Special Counsel v. Williams, 56 M.S.P.R. 277, 283-84 (1993), aff'd, Williams v. M.S.P.B., 55

## LIST OF RESOURCES FOR POTENTIAL CONFLICT OF INTEREST, RESIGN TO RUN LAW AND HATCH ACT

Below are resources available to candidates and potential candidates to determine if a conflict of interest exists. Please read each law in its entirety, as it is possible for a candidate to have a conflict with one law and not necessarily both.

### Commission on Ethics:

Opinions are issued by the Commission on Ethics (COE) and are binding on the conduct of the person who is the subject of the opinion and to assist in avoiding a prohibited conflict of interest. The Code of Ethics for Public Officers and Employees, adopted by the Legislature as **Part III of Chapter 112, Florida Statutes**, contains standards of ethics conduct and disclosures applicable to public officers, employees, candidates, lobbyists, and others in Florida State and local government, with the exception of Judges. (The ethical standards for Judges of Florida's judicial branch are contained in the Code of Judicial Conduct, adopted by the **Florida Supreme Court**.) Advisory opinions may be requested by letter presenting a question based on a real situation and including a detailed description of the situation to the:

**Florida Commission on Ethics**  
**Executive Director and General Counsel**  
**P O Drawer 15709**  
**Tallahassee, FL 32317-5709**  
**OR**  
**3600 Maclay Boulevard, South, Suite 201**  
**Tallahassee, FL 32312**  
**Phone: 850.488.7864**  
**Fax: 850.488.3077**  
**Website address: <http://www.ethics.state.fl.us/>**

### Division of Elections:

Pursuant to ***FS 99.012(3) Restrictions on individuals qualifying for public office***, no officer may qualify as a candidate for another public office, whether state, district, county, or municipal, if the terms or any part thereof run concurrently with each other, without resigning from the office he or she presently holds. If required, ***written resignations are due at least 10 days prior to the first day of the qualifying period.***

The Florida Department of State, Division of Elections (DOE) provides advisory opinions, as outlined in **Rule 1S-2.010 Advisory Opinions**, to Supervisors of Elections, *candidates*, local officers having election related duties, as well as to political parties, political committees, committees of continuous existence and other persons or organizations engaged in political activity relating to any provisions or possible violations of the Florida Election Laws. You may seek an advisory opinion in writing to the:

**Florida Department of State**  
**Division of Elections, Director's Office**  
**Room 316, R. A. Gray Building**  
**500 South Bronough Street**  
**Tallahassee, Florida 32399-0250**  
**Phone: 850.245.6200**  
**Fax: 850.245.6217 or 850.245.6218**  
**E-mail: [DivElections@dos.state.fl.us](mailto:DivElections@dos.state.fl.us)**  
**Website address: <http://election.dos.state.fl.us/>**

**United States Office of Special Counsel:**

The U. S. Office of Special Counsel (OSC) is an independent federal investigative and prosecutorial agency. The Counsel's basic authorities come from three federal statutes: the Civil Service Reform Act, the Whistleblower Protection Act, and the Hatch Act. OSC issues advisory opinions to persons seeking advice about political activity under the Hatch Act. You may request such advice by mail, phone, fax, or e-mail to the:

**Hatch Act Unit**

**United States Office of Special Counsel**

**1730 M Street, N. W., Suite 201**

**Washington, D.C. 20036-4505**

**Phone: 800.854.2824 or 202.254.3650**

**Fax: 202.653.5151**

**E-mail: [hatchact@osc.gov](mailto:hatchact@osc.gov)**

**Website address: [http://www.osc.gov/ha\\_role.htm](http://www.osc.gov/ha_role.htm)**

**Attorneys:**

Potential candidates are encouraged to consult with their Employer and/or Attorney of your Employer, the attorney for the agency for the office being sought, and/or your personal attorney.

The resources listed above are for information purposes only and are not inclusive of all agencies. As individual circumstances vary, so may their respective agency providing an advisory opinion. The information is being provided as a tool to help potential candidates. This office does not issue opinions as to the legality of one's need to resign for any of the above laws. It is the candidate's responsibility to seek legal advice.



**SUPERVISOR OF ELECTIONS QUALIFYING CHECKLIST  
NOON, JUNE 8 – NOON, JUNE 12, 2020**

CANDIDATE'S WITH PARTY AFFILIATION

Candidate's Name \_\_\_\_\_

Office Sought \_\_\_\_\_

- Appointment of Campaign Treasurer  
**(DS-DE 9)**
- Statement of Candidate **(DS-DE 84)**
- Candidate Oath **(DS-DE 301SL)**
- Ballot Name Label
- Recording
- CE Form 6 Full and Public Disclosure of Financial Interests
- Equipment Testing Notice Receipt
- Check (*written from Campaign Account*)  
Amount \_\_\_\_\_
- Issue Receipt for Qualifying Check

AND/OR

- Petition (1,355 Required)

**SOE or Deputy** \_\_\_\_\_

**Note: Timestamp all qualifying paperwork & give copy to candidate. Scan all documents.**



**PLEASE BRING THE FOLLOWING PAPERS TO  
THE SUPERVISOR OF ELECTIONS OFFICE DURING QUALIFYING  
NOON - Monday, June 8- Noon - Friday, June 12, 2020**

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

