

2024 Candidate Election Information



CITY OF BARTOW

**CITY CLERK'S OFFICE
450 N. Wilson Avenue, Bartow, FL 33830
Phone: (863) 534-0100**

INTERPRETATION OF FLORIDA LAW

IT IS NOT THE RESPONSIBILITY OF THIS OFFICE TO INTERPRET FLORIDA STATUTES CONTAINED WITHIN FLORIDA LAW. FOR ANY INTERPRETATION OR LEGAL OPINION, YOU MAY WANT TO CONTACT:

DIVISION OF ELECTIONS
ROOM 316 R.A. GRAY BLDG.
500 SOUTH BRONOUGH ST.
TALLAHASSEE, FL 32399-0250
PHONE: (850) 245-6200

NOTICE

PLEASE BE ADVISED THIS INFORMATION BOOKLET DOES NOT COVER EVERY LAW IN FLORIDA STATUTES. THIS BOOKLET IS AN OVERVIEW OF QUESTIONS FREQUENTLY ASKED ABOUT CAMPAIGNS. IT IS NOT INTENDED AS A COMPLETE DIGEST OF THE ELECTION LAWS. IT IS YOUR RESPONSIBILITY TO READ THE ELECTION CODE AND OBSERVE ALL REQUIREMENTS THEREIN. IF YOU HAVE A QUESTION ABOUT YOUR CAMPAIGN, ALWAYS REFER TO THE FLORIDA STATUTES OR YOUR HANDBOOK. IF YOU DO NOT FIND YOUR ANSWER IN THE FLORIDA STATUTES OR YOUR HANDBOOK, YOU SHOULD CONTACT YOUR QUALIFYING OFFICER OR THE POLK COUNTY SUPERVISOR OF ELECTIONS. REMEMBER ALL MATERIAL IS SUBJECT TO CHANGE BY THE FLORIDA LEGISLATURE.



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SECTION 1

- a. Qualifying Overview memorandum
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- e. Form DS-DE 9 Appointment of Campaign Treasurer and Designation of Campaign Depository (two copies included)
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MEMORANDUM

TO: Candidates for City Commission

FROM: Jacqueline Poole, City Clerk

SUBJECT: Qualifying Overview

DATE: January 11, 2024

Attached in this packet are forms that you will need as a Candidate in the April election. Enclosed you will find a copy of a Compilation of the Election Laws of the State of Florida, Candidate and Treasurers Information Booklet, City Charter and Election Code for the City of Bartow. The material is important to you as a candidate and should be studied thoroughly as it outlines the responsibilities of candidates and campaign treasurers in detail.

You must execute TWO of the Form DS-DE 9 - one for the Appointment of Campaign Treasurer and Designation of Campaign Depository AND the other for the Deputy Campaign Treasurer (if the Campaign Treasurer is someone is other than the Candidate) as soon as possible and return to the City Clerk's office. You **cannot** accept any campaign contributions until these forms are returned.

At the time of Qualifying (**Monday, February 5, 2024, at 9:00 a.m. through Friday, February 9, 2024, at 5:00 p.m.**), you must pay your Filing Fee of \$134.25 **FROM YOUR CAMPAIGN ACCOUNT** and submit all the documents listed in the separate memo entitled "QUALIFYING FORM CHECKLIST".

You must file your first Campaign Treasurer's report, after qualifying, on Friday, March 8, 2024, by 5:00 p.m. There will be three (3) additional reports due during the course of your campaign and those dates are outlined on the **CHECKLIST**. **IF YOU FILED YOUR DS-DE 9 FORMS PRIOR TO QUALIFYING, YOU MUST SUBMIT MONTHLY TREASURER REPORTS AS WELL. THOSE ADDITIONAL REPORTS ARE DUE ON FEBRUARY 9TH AND MARCH 8TH.** The last day for accepting contributions for your campaign account for each report is Thursday at midnight prior to each report. Disposition of Campaign Funds must be made within 90 days of Election, Withdrawal, or Termination. Please pay careful attention to F.S. 106.07(8)(a) "any candidate failing to file a report on the designated due date shall be subject to a fine ... and such fine shall be paid from **personal funds** of candidate."

The Election will be held on Tuesday, April 2, 2024, from 7:00 a.m. to 7:00 p.m. If there is a tie vote for winner of a seat the City Commission shall make provision at its next meeting for a special runoff election between the candidates receiving the tie vote to be held within thirty (30) days per City Charter.

Please read the enclosed materials and if you have any questions, please feel free to contact me at 863-534-0100 extension 1256.

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PLEASE BE AWARE THAT THE CAMPAIGN TREASURER'S FORMS ARE CONTAINED IN THIS PACKET AS WELL AS THE DATES THAT THESE REPORTS ARE DUE. THESE FORMS SHOULD BE PASSED ALONG TO YOUR CAMPAIGN TREASURER IN ORDER TO HAVE THE REPORTS FILED IN A TIMELY FASHION.

QUALIFYING SUBMITTAL CHECKLIST

BARTOW MUNICIPAL ELECTION - TUESDAY, APRIL 2, 2024

QUALIFYING DATES: February 5, 2024, at 9:00 a.m. through February 9, 2024, at 5:00 p.m.

TO QUALIFY FOR ELECTION YOU MUST SUBMIT THE FOLLOWING:

1. **FORM DS-DE 9 APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY:** This form must be executed as soon as possible and returned to the City Clerk's Office. You CANNOT accept any campaign contributions until this form is returned.
2. **FORM DS-DE 9 APPOINTMENT OF CAMPAIGN TREASURER DEPUTY:** This form must be executed as soon as possible and returned to the City Clerk's Office. You CANNOT accept any campaign contributions until this form is returned.
3. **FORM COB-50 APPLICATION FOR CANDIDATES**
4. **FORM DS-DE 302NP CANDIDATE OATH:** Please print your name as you wish to appear on the ballot – name may not be changed after the end of qualifying.
5. **QUALIFYING FEE:** This must be a check drawn on the campaign account and signed by the treasurer or deputy treasurer in the amount of 1% for the Annual Salary or \$134.25.
6. **FORM DS-DE 84 STATEMENT OF CANDIDATE:** regarding Chapter 106.023, F.S. Must be filed within 10 days of Opening Campaign Account.
7. **FORM COB-51 AFFIDAVIT OF CANDIDATE**
8. **FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTEREST:** This form must be filed electronically. You will log in at <https://disclosure.floridaethics.gov/Account/Login>.



MEMORANDUM

TO: Candidates for City Commission

FROM: Jacqueline Poole, City Clerk

SUBJECT: OPENING UP CAMPAIGN ACCOUNT

DATE: February 1, 2024

Please note many banks are requiring a federal ID number to open campaign accounts. To get an EIN, apply online at: <https://www.irs.gov/businesses/small-businesses-self-employed/apply-for-an-employer-identification-number-ein-online>



MEMORANDUM

TO: Candidates for City Commission

FROM: Jacqueline Poole, City Clerk

SUBJECT: Qualifying Fees

Date: January 5, 2024

Your Qualifying Fee of \$134.25 must be submitted from your CAMPAIGN ACCOUNT.

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

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

(PLEASE PRINT OR TYPE)

SECTION 1.e

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



**FORM COB-50 - CITY OF BARTOW
APPLICATION FOR CITY COMMISSION CANDIDATE
BARTOW, FLORIDA 33830**

_____, 2024

TO: CITY CLERK
CITY OF BARTOW
BARTOW, FL 33830

I hereby make an application to have my name printed on the official ballot for election to Seat No. _____
District _____ on the City Commission.

I would like my name to appear on the ballot EXACTLY as follows:

The following documents to qualify are attached hereto as required by law:

1. Form COB-51 AFFIDAVIT OF CANDIDATE
2. Form DS-DE 9 APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF DEPOSITORY
3. Form DS-DE 302NP CANDIDATE OATH
4. Form 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTEREST
5. A check made payable to the City of Bartow for 1% of the annual salary of the office sought.
(\$134.25). Undue Burden? YES _____ NO _____

Dated this _____ day of _____, 2024.

SIGNATURE OF CANDIDATE

Filed this _____ day of _____, 2024, at _____ (a.m. or p.m.)

CITY CLERK OR DESIGNEE

(SEAL)



FORM COB-51 - CITY OF BARTOW
AFFIDAVIT OF CITY COMMISSION CANDIDATE
BARTOW, FLORIDA 33830
(Section 34-2 – Code of Ordinances)

STATE OF FLORIDA

COUNTY OF POLK

On this day, personally appeared before me, the undersigned authority,

being by me duly sworn, an oath stating:

1. That he/she is a qualified elector of the City of Bartow, Florida.
2. That he/she has been a resident of the City continuously for eighteen (18) months immediately preceding the date of commencement of the term of office for which he/she seeks election.
3. That he/she will hold no public office except that of a Notary Public, an officer in the National Guard, or an officer in the Organized Reserves of the Armed Forces of the United States, upon commencement of the term of office for which he/she seeks election.
4. That he/she not become and is not a candidate as a nominee or representative of any political party or any convention representing or acting for any political party.
5. That he/she is seeking election to Seat No. _____ and that he/she resides in the _____ District of the City if seeking election in Seat 2, 3, or 5.

SIGNATURE OF CANDIDATE

Sworn to and subscribed before me __ physical presence or __ online notarization this _____ day of _____, 2024.

CITY CLERK OR DESIGNEE

(SEAL)

NOTE: This form shall be filed with the City Clerk or her Designee of the City of Bartow, Florida.

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

SECTION 1.h**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** _____

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: _____

Signature of Notary Public

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

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) 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	Certain Vowel Sounds with R	
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	(WHICH) 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-zhuhn) 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



**AFFIDAVIT OF UNDUE BURDEN
FOR MUNICIPAL CANDIDATES
ELECTION ASSESSMENT ONLY**
(Section 99.093 Florida Statutes)

STATE OF FLORIDA

COUNTY OF POLK

I swear (or affirm) under oath that I intend to qualify as a candidate for the office of City Commissioner for the City of Bartow, Florida, Seat No. _____ District _____ and that I am **unable to pay the 1%** Election Assessment Fee for that Office without imposing an undue burden on my personal resources otherwise available to me.

UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT IT IS A TRUE AND CORRECT STATEMENT.

SIGNATURE OF CANDIDATE

Sworn to and subscribed before me ___ physical presence or ___online notarization this _____ day of _____, 2024.

NOTARY PUBLIC

(SEAL)

**MEMORANDUM**

TO: Candidates for City Commission

FROM: Jacqueline Poole, City Clerk

SUBJECT: Statement of Candidate Regarding Chapter 106 F.S.

Date: January 5, 2024

Pursuant to Section 106.023, Florida Statutes, each candidate must file a statement with the qualifying officer (City Clerk) within 10 days after the Appointment of Campaign Treasurer and Deputy 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).

If you have any questions or need assistance, contact the Polk County Supervisor of Elections office at 863-534-5888.

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).

For Financial Disclosure Form 6 filing information, please visit the commission on Ethics website.

[https:// https://disclosure.floridaethics.gov/Account/Login](https://disclosure.floridaethics.gov/Account/Login)

Announcements

- WELCOME to the new Electronic Financial Disclosure Management System (EFDMS)!
- Form 6, Form 6X, and the Form 6F, as well as the Form 1, Form1X, and 2024 Form 1F must be filed via EFDMS. The Form 2, Quarterly Client Disclosure, is also filed via EFDMS.
- The form requirement for Mayors and Elected members of governing bodies of municipalities will change from a Form 1 to a Form 6 in 2024. Those officials who are serving as of December 31, 2023 and those elected to those offices in 2024, will file the Form 6 in 2024 instead of the Form 1. Those filers can access the system beginning January 1, 2024.
- Form 1 filers, state and local, as well as new Form 6 filers will file electronically in 2024 via the Electronic Financial Disclosure Management System (EFDMS). Access for these filers will go live January 1, 2024.
- A Form 6 e-filing training video is available. A sample Form 6 is also available.
- Instructions, FAQs, and tutorials are available from the dashboard within EFDMS. Additional assistance can be obtained Monday-Friday from 8:00 a.m. until 5:00 p.m. by contacting the Commission.
- The recording of the June 7, 2023 webinar overview of EFDMS is now available.
- The recording of the webinar for Coordinators from January 6, 2023 is now available.
- **If you have an annual filing requirement AND are running for office**, you will complete your disclosure in EFDMS and submit your filing electronically to the Commission, then print a verification/receipt of e-filing your form or print a copy of your disclosure to file with your Qualifying Officer
- **If you are a Candidate who does not currently hold an office or other position requiring disclosure**, you will complete your disclosure in EFDMS via the "I am a Candidate" link and print it for filing with your Qualifying Officer. You will not submit your disclosure to the Commission electronically.
- All communication about filing requirements and due dates for filers will be provided via email only. Filers **MUST** maintain a current email address in EFDMS. **By law, failure to maintain a current email address will not qualify as an "unusual circumstance" during an appeal of an automatic fine for failure to timely file a Form 6.**

For Financial Disclosure Form 6 filling information, please visit the commission on Ethics website.

[https:// https://disclosure.floridaethics.gov/Account/Login](https://disclosure.floridaethics.gov/Account/Login)

2022 Form 6 - Full and Public Disclosure of Financial Interests

General Information

Name: DISCLOSURE FILER

Address: SAMPLE ADDRESS

County: SAMPLE COUNTY

PID SAMPLE

AGENCY INFORMATION

Organization	Suborganization	Title
SAMPLE	SAMPLE	SAMPLE

Net WorthMy Net Worth as of December 31, 2022 was \$ [AMOUNT] .**Assets**

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 effect is N/A.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset

2022 Form 6 - Full and Public Disclosure of Financial Interests

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income.

☐ I elect to file a copy of my 2022 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

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):

Business Entity	Major Sources of Business Income	Address	Principal Business Activity of Source

Interests in Specified Businesses

Business Entity # 1

Training

Based on the office or position you hold, the certification of training required under Section 112.0142, F.S., is not applicable to you for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Digitally signed:

Filed with COE:

PAGE INTENTIONALLY LEFT BLANK.

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)(1)(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.



FLORIDA DEPARTMENT *of* STATE

CHARLIE CRIST
Governor

DAWN K. ROBERTS
Interim Secretary of State

IMPORTANT NOTICE

TO: All Candidates Qualifying with the Division of Elections

FROM: Donald L. Palmer, Director
Division of Elections *DP*

DATE: May 11, 2010

SUBJECT: Use of Nickname on Ballot

NOTICE TO CANDIDATES QUALIFYING WITH THE DIVISION OF ELECTIONS¹

The candidate oath form that must be filed during the qualifying period requires you to designate your "name as you wish it to appear on ballot." Case law and Division of Elections Opinions 86-06 and 09-05 permit a nickname to be printed on the ballot along with one's surname when the nickname is one by which the person is generally known or one that the person has used as part of his or her legal name. For example, if John Jones is generally known as Bo Jones, permissible designations on the ballot may be John "Bo" Jones, John (Bo) Jones, Bo Jones, or John Jones. The Division of Elections opinions recognize that a qualifying officer may require the candidate to make a satisfactory showing that the candidate is generally known by the nickname or the nickname has been used as part of the candidate's legal name before a nickname is printed on the ballot.

If you plan to designate a nickname on your candidate oath form other than a generally recognized shortened version of your legal name (e.g., "Rob" or "Bob" for Robert, "Bill" for William, "DJ" for David Joseph, *etc.*), you should provide notice of your intention to the Division of Elections well in advance of the qualifying period and make a satisfactory showing that you are generally known by the nickname or that you have used the nickname as part of your legal name. Failure to provide such information in advance may result in

¹ If you are a candidate who does not qualify with the Division of Elections and you desire to have your nickname printed on the ballot, you should contact your qualifying officer well in advance of the qualifying period to find out what the qualifying officer's requirements are to allow your nickname to be printed on the ballot.

the Division not having sufficient time during the qualifying period to determine if the nickname may be printed the ballot.

Attached to this Notice is an example of an Affidavit that also mentions supporting documentation that you may consider submitting to the Division of Elections in advance to show that the nickname is legitimate.

NOTE: Division of Elections Opinion 86-06 states: Descriptive information such as a title (for example, Dr. or M.D.), although not part of a person's name, is permissible only when two persons of the same name or whose names are so similar as to reasonably cause confusion, seek the same office." Therefore, ordinarily, even if a candidate is commonly referred to as "Doctor," "Professor," or "Colonel," those titles would not be allowed as a nickname or as a part of a nickname unless such descriptive information is reasonably necessary to avoid confusion among candidates.

KRB/kfg



AFFIDAVIT FOR USE OF NICKNAME ON BALLOT

AFFIDAVIT OF _____
Print Name

STATE OF FLORIDA
COUNTY OF POLK

BEFORE ME, the undersigned authority, personally appeared _____ (insert name),
whom being first duly sworn or placed under affirmation, says:

1. My legal name is _____. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.
2. I am a candidate for the office of _____.
3. 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. I plan to designate this nickname on my candidate oath as the name I wish to have printed on the ballot when I submit the candidate oath form during the qualifying period for the above office.
4. Attached are _____ documents that show that my nickname is one by which I am generally known or is one that I have used as a part of my legal name: (list the title of any documents or affidavits from other persons reflecting that the candidate is generally known by the nickname or that it has been used as part of the candidate's legal name _____

Further, affiant sayeth not.

Signature of Affiant

Printed/Typed Name of Affiant

Sworn to and subscribed before me by means of ___ physical presence or ___ online notarization, this _____
day of _____, 2024 by _____.

(NOTARY SEAL)

Signature of Notary Public

Printed Name of Notary Public

Personally known to me _____

OR

Produced identification _____ Type of Identification produced _____