

**CITY OF LIGHTHOUSE POINT, FLORIDA
CANDIDATE CHECKLIST FOR ELECTION
CITY COMMISSIONER**

CANDIDATE NAME: _____ SEAT# _____

RESIDENCY ADDRESS: _____

MAILING ADDRESS: _____
Street City State Zip

TELEPHONE: WORK: _____ HOME: _____

CAMPAIGN TREASURER'S NAME: _____ DATE APPOINTED: _____

ADDRESS: _____
Street City State Zip

TELEPHONE: WORK: _____ HOME: _____

REGISTERED VOTER: s. 106.021(c), F.S. Any Campaign Treasurer or Deputy Treasurer shall be a registered voter in this State

NAME OF PRIMARY DEPOSITORY: _____

PRIMARY DEPOSITORY'S ADDRESS: _____

Any bank, savings and loan association, or credit union authorized to transact business in this State may be designated as a Campaign Depository.

REMARKS: If applicable: Resign to Run Letter or Leave of Absence Notice must be filed at least ten (10) days prior to first day of qualifying. (s.99.012 F.S.)

AT QUALIFYING TIME THE FOLLOWING MUST BE FILED:

- | | | |
|----------------------------|---|--|
| _____ | DS-DE 9 | Appointment of Campaign Treasurer and Designation of Depository (if not already on file). |
| _____ | DS-DE 84 | Statement of Candidate. |
| _____ | DS-DE 25 | Loyalty Oath and Oath of Candidate. |
| _____ | | Notice of Candidacy Form and Candidacy Petition. |
| _____ | CE Form 1 | Statement of Financial Interests (may not be a copy if incumbent candidate has already filed financial disclosure for the year). |
| <u> \$50.00 </u> | Filing Fee | Must be written on <u>CAMPAIGN CHECK ONLY</u> - payable to the City of Lighthouse Point. |
| <u> \$18.00 </u> | For Commissioner Candidate Only - 1% Election Assessment | Must be written on <u>CAMPAIGN CHECK ONLY</u> - payable to the City of Lighthouse Point. |
| _____ | Acknowledged | Notice of Logic and Accuracy Test. |

RETURN THIS PAGE TO THE CITY CLERK WITH YOUR QUALIFYING PAPERS.