



2024

FORMS REQUIRED TO RUN FOR OFFICE

FORMS AND FEES REQUIRED TO QUALIFY TO RUN FOR OFFICE

Qualifying Period begins on June 4, 2024, at 8:00 a.m. and ends on June 18, 2024, at 5:00 p.m.

1. Form DS-DE 9, “*Appointment of Campaign Treasurer and Designation of Campaign Depository for Candidates*” - **Candidates must file this form before opening a campaign account.** A candidate can appoint a campaign treasurer and designate a campaign depository at any time, but no later than the date the candidate qualifies for office. Nothing prohibits a person from announcing their intention to become a candidate prior to filing Form DS-DE 9, as long as no contributions are received, no expenditures are made, and no signatures are obtained on a candidate petition.

2. Application of Acknowledgment of Electronic Filing Information

3. Form DS-DE 84, “*Statement of Candidate*” - **Candidates must file this form within ten days after filing Form DS-DE 9.**

4. Form DS-DE 302np, “*Candidate Oath –Nonpartisan Office.*”

5. Candidates must file Form 6 “*Full and Public Disclosure of Financial Interests*” online with the Florida Commission on Ethics
<https://disclosure.floridaethics.gov/Account/Login?ReturnUrl=%2f> **and provide a copy the City Clerk.**

6. Incumbents must file Form 6 “*Full and Public Disclosure of Financial Interests*” online with the Florida Commission on Ethics
<https://disclosure.floridaethics.gov/Account/Login?ReturnUrl=%2f> **and provide a copy the City Clerk.**

7. Affidavit to Accompany Application to Qualify As a 2024 St. Petersburg City Council Candidate

QUALIFYING FEE OR NOMINATING PETITIONS

For Councilmember, a qualifying fee of \$150 or petitions with the signatures of not less than five hundred (500) qualified electors of the district in which the candidate resides.

Section 99.092(1), F. S., provides that your qualifying fee will be returned only if you withdraw your candidacy **before qualifying ends**.

Section 99.095(3), F. S., requires petitions be submitted **prior to NOON on May 7, 2024, the 28th day preceding the start of qualifying**. Signatures may not be obtained until the candidate has filed the Appointment of Campaign Treasurer and Designation of Campaign Depository for Candidates, Form DS-DE 9.

Check must be drawn on the campaign account.

ELECTION ASSESSMENT FEE OR AFFIDAVIT OF UNDUE BURDEN

This fee, imposed by the Florida Legislature and remitted to the State, is 1% of the annual salary of the office for which the candidate is qualifying.

The Election Assessment Fee for the office of Councilmember is \$565.50 (based on the current annual salary of \$56,5500.00).

Check must be drawn on the campaign account.

If a candidate is unable to pay the Election Assessment Fee, he/she may file an Affidavit of Undue Burden. Prior to disposing of surplus campaign funds, if you filed an Affidavit of Undue Burden, you are required to pay the Assessment Fee per Section 106.141(6), F. S.

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

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

(PLEASE PRINT OR TYPE)

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

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

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

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

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

4. Telephone:

()

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

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

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

I intend to run as a Write-In Candidate.

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

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

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

11. Name of Treasurer or Deputy Treasurer:

12. Telephone:

()

13. Email Address:

14. Mailing Address:

15. City:

16. State:

17. Zip Code:

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

19. Name of Bank:

20. Address:

21. City:

22. County:

23. State:

24. Zip Code:

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

25. Date:

26. Signature of Candidate:

X

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

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

Campaign Treasurer.

Deputy Treasurer.

28. Date:

29. Signature of Campaign Treasurer or Deputy Treasurer

X

City of St. Petersburg

Application and Acknowledgement of Electronic Filing Information



1. CHECK APPROPRIATE BOX(ES)

Candidate Treasurer/Deputy Committee Committee Treasurer

2. Name of Candidate/Committee (First, Middle, Last)

3. Address (include P.O. box or street, city, state, zip code)

4. Telephone

5. E-mail address

All reports of campaign finance activity must be filed with the City Clerk using the electronic campaign finance reporting system available online at <https://cityofstpetersburgfl.easylvotecampaignfinance.com> (the "System") unless an alternative filing procedure is required by the Americans with Disabilities Act of 1990 or other applicable law.

Credentials to log into the System are approved on an individual basis and may not be shared--even with member of the same campaign or committee. Each user who is approved for credentials is responsible for protecting those credentials from disclosure or compromise. Once credentials have been approved for a user, that user is deemed responsible for every report filed using those credentials until such time as the City Clerk is notified of disclosure or compromise of those credentials. Campaign or committee must immediately notify the City Clerk if any user associated with that campaign or committee becomes ineligible to hold the credentials issued to that user.

Each report must be filed before midnight at the end of the due date. Late-filed reports are subject to fines pursuant to Florida Statutes sections 106.07(8) or 106.29(3), as applicable.

By filing a report through the System, a person (i) is deemed to have electronically signed the report under oath and to have certified the correctness of the report in accordance with Florida Statutes sections 106.07(5) or 106.29(2), as applicable; (ii) is responsible for the accuracy and veracity of the report; and (iii) commits a criminal act by certifying a report that is known to be incorrect, false, or incomplete.

A report is deemed filed with the City Clerk only when the System issues a receipt confirming the date and time at which the report was filed. The system will issue a separate notice for the subsequent acceptance or rejection of the report by the City Clerk. Once a report has been filed with the City Clerk, it may be changed only by filing an amendment to that report.

The City is not responsible for providing the internet access necessary to access the System, and problems with an individual candidate's internet access at a residence, office, coffee shop, etc. do not excuse late filing by that candidate. The City Clerk will provide an alternate filing deadline for candidates only in the event that the Reporting System is *generally* unavailable and all candidates are affected.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ AND UNDERSTAND THE FOREGOING FORM FOR APPLICATION AND ACKNOWLEDGEMENT OF ELECTRONIC FILING INFORMATION AND THAT THE FACTS STATED IN IT ARE TRUE.

6. Date

7. Signature of Candidate/Committee Chair

X

8. **Treasurer's Application and Acknowledgement of Electronic Filing Information** (fill in the blanks and check the appropriate block)

I, _____ (printed name), hereby acknowledge that I am representing the Candidate/Committee above as the Campaign Treasurer Deputy Treasurer

X

Date

Signature of 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).

CANDIDATE OATH

NONPARTISAN OFFICE

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

Write-in candidate

OFFICE USE ONLY

Candidate Oath

Name to appear on ballot: _____

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

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

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

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

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

Statement of Outstanding Fines, Fees, or Penalties

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

YES, I Do _____ NO, I Do Not _____

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

X _____ ()
Signature of Candidate Telephone Number Email Address

Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF _____

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

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

this _____ day of _____, 20____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

Phonetic Spelling of Name

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

Statement of Outstanding Fines, Fees or Penalties

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

<i>Amount</i>	<i>Entity</i>

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-zuhhn) 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 TO ACCOMPANY APPLICATION TO QUALIFY AS
A 2024 ST. PETERSBURG CITY COUNCIL CANDIDATE**

BEFORE ME, the undersigned authority, duly authorized under the laws of the State of Florida to administer oaths, personally appeared the person named below, who, being first duly sworn, deposes and says as follows:

1. My name is (full name) _____, and I am over 18 years of age.
2. By submitting this affidavit to accompany various state and local election forms, I am applying to qualify as a candidate for the 2024 municipal election cycle for the office of Council Member for District (number) _____.
3. I am a qualified elector of the City of St. Petersburg, Florida.
4. I have maintained continuous residency in District (number) _____ since at least August 20, 2023, and I intend to maintain such residency through the date of the 2024 municipal primary election and then, if declared a primary nominee, through the date of the 2024 municipal general election.
5. I am not a candidate, nominee, or representative of any political party or any committee or convention representing or acting for any political party.

FURTHER AFFIANT SAYETH NAUGHT.

Signature: _____

STATE OF FLORIDA
COUNTY OF PINELLAS

This instrument was acknowledged before me on (date) _____ by means of
 physical presence or online notarization by (name) _____,
who is personally known to me or produced the following as identification (description): _____

[NOTARY STAMP]

Signature: _____

Printed Name: _____

AFFIDAVIT OF UNDUE BURDEN

(Section 99.097(4), Florida Statutes)

IMPORTANT: (1) Paying signature gatherers will preclude or invalidate the filing of an undue burden oath. Section 99.097(6), Florida Statutes, provides: (a) If any person is paid to solicit signatures on a petition, an undue burden oath may not subsequently be filed in lieu of paying the fee to have signatures verified for that petition. (b) If an undue burden oath has been filed and payment is subsequently made to any person to solicit signatures on a petition, the undue burden oath is no longer valid and a fee for all signatures previously submitted to the supervisor of elections and any submitted thereafter shall be paid by the candidate, person, or organization that submitted the undue burden oath. If contributions as defined in s. 106.011 are received, any monetary contributions must first be used to reimburse the supervisor of elections for any signature verification fees that were not paid because of the filing of the undue burden oath. [Note: The second sentence in (b) applies only when payment is made to a signature gatherer after an undue burden oath had been filed.]

(2) Upon a candidate terminating the campaign, any candidate who qualified by the petition process and who has surplus funds, must first apply the surplus funds to the reimbursement of the signature verification fee (if applicable). See s. 106.141(7), Florida Statutes.

I certify under oath that I intend to qualify as a candidate for the office of _____ and that I am unable to pay the fee for verification of petition signatures for that office without imposing an undue burden on my personal resources or on resources otherwise available to me.

X

Signature of Candidate		Print Candidate's Name	
Address		City	
		()	
State	Zip	Telephone Number	

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: _____