

**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)

Kelli M Glass Lighton

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

*PO Box 1493
Stuart FL 34995*

4. Telephone

(772) 215-7816

5. E-mail address

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

City of Stuart IV

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

0. Name of Treasurer or Deputy Treasurer

Kelli Glass Lighton

11. Mailing Address

Same

12. Telephone

() Same

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

Seacoast National Bank

20. Address

Colorado

21. City

Stuart

22. County

Martin

23. State

FL

24. Zip Code

34994

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

6/19/17

26. Signature of Candidate

Kelli Glass Lighton

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

I, *Kelli Glass Lighton*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/19/17

Date

Kelli Glass Lighton
Signature of Campaign Treasurer or Deputy Treasurer

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

OFFICE USE ONLY

OATH OF CANDIDATE
(Section 99.021, Florida Statutes)

I, Kelli Glass Leighton
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of Stuart City Commission, IV,
(office) (district #)
IV; I am a qualified elector of Martin County, Florida;
(circuit #) (group or seat #)

I am qualified 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.

X Kelli Glass Leighton (772) 215-7816
Signature of Candidate Telephone Number Email Address

PO Box 1493 Stuart FL 34995
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 105913527

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

Kelli Glass Leighton

STATE OF FLORIDA

COUNTY OF Martin

Sworn to (or affirmed) and subscribed before me this 19th day of June, 2017.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____



CHERYL WHITE
MY COMMISSION # FF 967781
EXPIRES: April 6, 2020
Bonded Thru Budget Notary Services

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

OATH OF RESIDENCY

**STATE OF FLORIDA
COUNTY OF MARTIN**


Before me this day personally appeared Kelli Glass Leighton
who being duly sworn, deposes and says he/she has maintained a continuous residency
within the City of Stuart for more that twelve (12) months preceding the election. (Sec 7.03.)
Qualifying.

Kelli Glass Leighton
Signature of candidate

Sworn to and subscribes before me this 19th day of June, 2017.

[Signature]
Notary Public

My Commission Expires

 CHERYL WHITE
MY COMMISSION # FF 967781
EXPIRES: April 6, 2020
Served Thru Budget Notary Services

NOTICE TO CANDIDATE:
LOGIC AND ACCURACY TESTING OF VOTING
EQUIPMENT
DATES & TIMES

I, Kelli Glass Leighton Candidate for the Stuart City Commission
(Print Name), Group IV.

By signing this form, I do acknowledge that:

- I am an official Candidate for the Stuart City Commission, Group IV.
- I have received a copy of the official Candidate Calendar for the Notice of Logic and Accuracy Testing of Voting Equipment" listing the dates, times and location of the testing of the voting equipment, for the City of Stuart General Election and if necessary, the dates, times and location of the testing of the voting equipment for a Run-Off Election. F.S. 101.5612 (2)

SIGNATURE: Kelli Glass Leighton DATE: 6/19/17

STATEMENT OF FINANCIAL INTERESTS

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :
Glass Leighton Kelli Michelle

MAILING ADDRESS :
PO Box 1493

Stuart 34995 Martin

CITY: City of Stuart ZIP: COUNTY:

NAME OF AGENCY :
City Commissioner

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

2017 JUN -2 7:10:55
CLERK OF SUPERVISOR OF ELECTIONS

**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2016 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Martin Clerk of Court	100 East Ocean Blvd Stuart FL	Supervisor
City of Stuart	121 SW Flagler Ave Stuart	City Commissioner

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

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

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

N/A

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

OFFICE USE ONLY

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

I, Kelli Glass Leighton,

candidate for the office of Stuart City Commission;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X

Kelli Glass Leighton
Signature of Candidate

6/19/17

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).