

# **Municipal Level Candidate Application**

Candidate Name: Brian Lee Gray	
Office Sought: Lynn Haven City Commission Seat1	
As a candidate running for political office, you are accepting many responsibilities office can be a successful and rewarding experience if you take your candidacy seducated on election law requirements. Please do not rely on your knowledge of your new candidacy.	eriously and become well-
Candidate Reference Material	
IMPORTANT: It is <u>your responsibility</u> to check with this office periodically	y for changes in the laws.
BG I understand that I will receive the following in an email on 9 / / /20	21
16002 Bay County SOE Municipal Candidate Guide	
Florida Election Code All Chapters	
Petition Manual	
DS-DE 104 Petition Form	
BG I understand that I <u>MUST</u> file a DS-DE 9 with the Supervisor of Elections bank account, collect any contributions, make any expenditures and or gather significant.	ACC ACCORD
bank account, collect any contributions, make any expenditures and or gather sign	natures for petitions.
BG I understand the DS-DE 9 Appointment of Treasure requirements.	
1 understand the DS-DE 9 Appointment of Treasure requirements.	
Candidate Class	
I wish to set up a 1-hour appointment for 1 on 1 training to become better information of the set up a 1-hour appointment for 1 on 1 training to become better information of the set up a 1-hour appointment for 1 on 1 training to become better information.	med and educated on the /20 Time
OR	
I decline to set up an appointment for training and education.	
Municipal Residency Requirements Affidavit MUST be completed.	
16450 - Callaway – 36 Months Section 6.5  16459 - Lynn Haven registered voter within city limits Section 18-2.  16460 - Mexico Beach 1 year prior to Qualifying for office, Section 2-02.  16452 - Panama City 6 months prior to Election Day, Section 10-12.  16457 - Panama City Beach Mayor, 6 months prior to Election Day, Section 16458 - Panama City Beach Council, 6 months prior to Election Day, Section 16454 - Parker registered voter within city limits, Section 5  16456 - Springfield registered voter within city limits, Section 5.	
Candidate Signature  SOE Office Q.C. I.D. 23  &	09,01,202



### **Campaign Finance Reporting Policy**

#### **POLICY ON ELECTRONIC FILING**

- The SOE Office is requiring the electronic filing of campaign treasurer reports at no cost to candidates in order to make campaign contributions and expenditures readily available to the public.
- Campaign Finance Reports, for all local races, will be displayed on the SOE web.
- The SOE office will assign each candidate a user I.D. number, password and (2) pin numbers.

#### **POLICY ON LATE REPORTS**

- If a report is not received by the deadline, the SOE office will mail a certified letter to the candidate stating that the report has not been received and candidate is subject to a fine, as stipulated in Section 106.07(8) (b), F.S., for each day late.
- If the SOE office does not receive a response to the letter, the matter will be forwarded to the Florida Elections Commission and could be determined to be a willful violation.
- If applicable, the fine must be paid within twenty (20) days after the receipt of the notice of payment due. The Florida Elections Commission will be notified if fines have not been remitted in a timely manner and may pursue the fine.

#### POLICY ON JUSTIFYING LATE REPORTS

- Reports must be filed timely. There are no justifiable reasons for filing late reports unless otherwise determined by the Florida Elections Commission.
- Power outages, malfunction of SOE computer and/or computer program failure are the only valid reasons for not being able to file a report on time.

#### **POLICY ON AMENDING REPORTS**

- When a report is determined to require amending, the SOE office will initially contact the candidate by telephone and request that the report be amended within three (3) days.
- If no response is received, a formal letter will be sent requesting an amended report be completed and filed with our office within three (3) days of receipt of notification.
- If the amended report is not received within this time frame, the matter will be referred to the Florida Elections Commission and could be determined to be a willful violation.

### POLICY ON REVIEW OF ELECTRONIC REPORTS / POLICY ON AMENDING REPORTS

- The SOE office checks the following: Summary page for accuracy, complete names and addresses for each contribution and expenditure, occupation of contributor when required, purpose of expenditure listed, and contributions that exceed the lawful amount.
- This review does not relieve the candidate of the responsibility for the correctness and accuracy of the reports.

I have read and understand the policy above.

Candidate Signature

32°

Date 09,01,2022

SOE Office Q.C. I.D. \$23



## 99.093 Undue Burden Election Assessment Written Certification

#### 99.093 Municipal candidates; election assessment.

- (1) Each person seeking to qualify for nomination or election to a municipal office shall pay, at the time of qualifying for office, an election assessment. The election assessment shall be an amount equal to 1 percent of the annual salary of the office sought. Within 30 days after the close of qualifying, the qualifying officer shall forward all assessments collected pursuant to this section to the Department of State for deposit in the Elections Commission Trust Fund.
- (2) Any person seeking to qualify for nomination or election to a municipal office who is unable to pay the election assessment without imposing an undue burden on personal resources or on resources otherwise available to him or her shall, upon written certification of such inability given under oath to the qualifying officer, be exempt from paying the election assessment.

I am filing Assessment Fee Undue Burden Certification 1	per F.S. 99.093(2)
I (print candidate name): Brian Lee Gray accordance with F.S. 99.093(2) this shall serve as a writt oath to the qualifying officer, be exempt from paying the as my written certification of such inability, given by me Elections Qualifying Officer.	election assessment. I request this be accepted
I am DECLINING Assessment Fee Undue Burden Certif assessment fee.	fication per F.S. 99.093(2) I will pay the
Candidate Signature	$O(A)$ Date $\frac{09}{120}$ $\frac{22}{120}$
Notary: State of Florida County of 13ay	
Sworn to (or affirmed) and subscribed before me this	_day of <u>September</u> , 2022,
by (name of person making statement) Brian Lee	Gran.
Philos R Hitt	CHELSEA HITT  Notary Public - State of Fiorica  Commission # HH 273'43  My Comm. Expires Jun 10, 2026  Bonded through National Notary Asso.
(Signature of Notary Public - State of Florida) (Sta	amp Commissioned Name of Notary Public)
Personally Known _N/A OR Produced Identification	
Type of Identification Produced FL DL	
\$23 <b></b>	



## 99.097 Undue Burden Petition Written Certification

99.097(4) Petition Undue Burden

Type of Identification Produced

SOE Office Q.C. I.D.  $\frac{3}{2}$  &

The supervisor shall be paid in advance the sum of 10 cer of checking such signature, whichever is less, by the cand placed on the ballot, by the person or organization submit or organization seeking to have an issue placed upon the undue burden on personal resources or upon the resource son, or organization, such candidate, person, or organization inability given under oath to the supervisor, be entitled to	didate or, in the case of a petition to have an issue tting the petition. However, if a candidate, person, ballot cannot pay such charges without imposing an s otherwise available to such candidate, pertition shall, upon written certification of such
I am filing Petition Fee Undue Burden Certification	per F.S. 99.097(4)
I (print candidate name):  accordance with F.S. 99.097(4) the 10-cent verificat on my personal resources or upon resources otherwi accepted as my written certification of such inability Supervisor of Elections, entitling me to have my pet	se available to me at this time. I request this be y, given by me under oath, to the Bay County
I am DECLINING Petition Fee Undue Burden Certicost of 10 cents for each signature checked.	ification per F.S. 99.097(4) I will pay the petition
No Petition Requirements for this City	
Candidate Signature BAA Gra7	Date 09/01/2022
Notary: State of Florida County of	
Sworn to (or affirmed) and subscribed before me this	day of, 20,
by (name of person making statement)	
(Signature of Notary Public - State of Florida)	(Stamp Commissioned Name of Notary Public)
Personally Known N/A OR Produced Identification	