

**SHARON L. HARRINGTON
SUPERVISOR OF ELECTIONS
LEE COUNTY – FLORIDA**

<u>PHYSICAL ADDRESS</u> LEE COUNTY CONSTITUTIONAL COMPLEX 2480 THOMPSON STREET 3 RD FLOOR FORT MYERS FL 33901	<u>MAILING ADDRESS</u> please send all correspondence to this address P O BOX 2545 FORT MYERS FL 33902-2545
MAIN OFFICE 239 LEE VOTE 239-533-8683	FAX 239-533-6310 WEBSITE www.leeelections.com

QUALIFICATION CONFIRMATION

CANDIDATE	ARCHIE HAYWARD		
	LEE COUNTY COURT JUDGE GROUP 4		
DATE ISSUED	ALL FORMS SUBMITTED	FILING FEE PAID (check one)	RECEIVED BY
04-28-10	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> YES <input type="checkbox"/> PETITION METHOD <input type="checkbox"/> N/A(WRITE-IN)	BERNIE FELICIANO QUALIFYING OFFICER

This office is in receipt of all required candidate-qualifying forms, filing fee (if any) and/or candidate petition signatures required in order to qualify for the office you seek. If you have received a qualification confirmation from this office your candidate-qualifying process is complete.

Questions or concerns regarding candidate-qualifying can be addressed by contacting me at 239-533-6304.

Bernie Feliciano

Bernie Feliciano
Qualifying Officer

JUDICIAL OFFICE LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

OFFICE USE ONLY**STATE OF FLORIDA****COUNTY OF** LEE

I,

Archie

First Name

BEN

Middle Name/Initial

HAYWARD, Jr.

Last Name

a citizen of the State of Florida and of the United States of America, and being [a candidate for public office] do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Important: If elected, a candidate must retake the loyalty oath as specified in s. 876.05, Florida Statutes, and that oath shall be filed with the records of the governing official or employing governmental agency prior to the approval of payment of salary, expenses, or other compensation.

OATH OF CANDIDATE

(Section 105.031, Florida Statutes)

I,

ArchieHAYWARD

(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 judicial office of

County Judge

(office)

Lee

(district)

20th Judicial

(circuit)

4

(group)

; my legal residence is

Lee

County, Florida; I am a qualified elector

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; by executing this form, I have taken the oath required by ss. 876.05 – 876.10, Florida Statutes; 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 which I am required to resign pursuant to Section 99.012, Florida Statutes.

X

Signature of Candidate

Telephone Number

Email Address

P.O. Box 447

Address

Fort Myers

City

Florida

State

33902

ZIP Code

Sworn to (or affirmed) and subscribed before me this 28 day of April, 20 10.Personally Known: ☒ or

Produced Identification: _____

Type of Identification Produced: _____

Katherine A. Wilkinson

Signature of Notary Public – State of Florida

Print, Type, or Stamp Commissioned Name of Notary Public



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

FINANCIAL INTEREST

LAST NAME — FIRST NAME — MIDDLE NAME:

HAYWARD, Jr. Archie Ben

MAILING ADDRESS:

1700 Monroe Street

1700 Monroe St

CITY: ZIP: COUNTY:

Fort Myers, Fl. 33901 Lee

NAME OF AGENCY:

20th Judicial Circuit

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Group 4 County Judge

CHECK IF THIS IS A FILING BY A CANDIDATE ☒

FOR OFFICE
USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2009, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of April 22, 2010 was \$ 165,720.00

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

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.

The aggregate value of my household goods and personal effects (described above) is \$ 25,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)

VALUE OF ASSET

House & Lot \$18,550 + \$4,660	23,210
Ameriprise Stocks #11,325/753 Ameriprise, Minneapolis, Minn 55474; Edward Jones Stocks 201 Progress Parkway, Md. Hgts, Md. 63043; \$32,224.00; Prudential America Stocks 320 Park Ave N.Y. N.Y. 10022 \$82,315.63;	\$140,989.00
SunCoast C.U. P.O. Box 11904 Tampa, Fl 33680-1904 \$407.68; Wachovia Bank P.O. Box 563966 Charlotte NC 28256 \$1,907; SunTrust P.O. Box 622227, Orlando, Fl 32862 \$10,580; TIAA/CREF P.O. Box 1275 Charlotte, NC 28201 \$2,229.55	

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

Citi Visa P.O. Box 630919 Irving Texas 75063-0919	\$6,879.38
SunTrust Commercial Credit Services P.O. Box 4418 MC039 Atlanta, Ga 30302	\$9,854.86
SunCoast SFCU 6801 E. Hillsborough Ave. Tampa, Fl 33610-4197	\$6,744.92

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2009 federal income tax return, including all attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

☐ I elect to file a copy of my 2009 federal income tax return. [If you check this box and attach a copy of your 2009 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME:

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
State of Florida	200 E. Gaines Street Tallahassee, Florida 32399-0356	135,653

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions]:

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

PART E -- INTERESTS IN SPECIFIED BUSINESSES

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	1st Friday Networking Group		
ADDRESS OF BUSINESS ENTITY	P.O. Box 2090 F.M. Fl 32302		
PRINCIPAL BUSINESS ACTIVITY	Networking Group		
POSITION HELD WITH ENTITY	Secretary / resigned		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	<input checked="" type="checkbox"/>		
NATURE OF MY OWNERSHIP INTEREST	member		

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

STATE OF FLORIDA
COUNTY OF

Lee

Sworn to (or affirmed) and subscribed before me this 28 day of

April, 2010 by Archie B. Hayward Jr.

Kathin A. Wakami
(Signature of Notary Public--State of Florida)

Katherine A. Wilkinson
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ☒

Type of Identification Produced



Archie B. Hayward Jr.
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.