

**CANDIDATE OATH -
JUDICIAL OFFICE**

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

OFFICE USE ONLY

Candidate Oath

(Section 105.031, Florida Statutes)

I, LUISE KRIEGER MARTIN

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the judicial office of MIAMI DADE COUNTY JUDGE, _____, 11th,
(Office) (District #) (Circuit #)

6 _____; my legal residence is MIAMI DADE County, Florida; I am a qualified elector
(Group #)

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; 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; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Candidate's Florida Voter Registration Number (located on your voter information card): 109288706

Phonetic spelling for audio ballot: Print 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 2 of this form): [Not applicable to write-in candidates.]
loo-eez kree-ger mahr-tin

X [Signature] (305) 252-5858 info@judgekmart.com
Signature of Candidate Telephone Number Email Address

Address City State ZIP Code

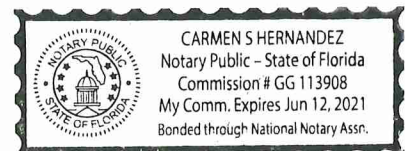
STATE OF FLORIDA
COUNTY OF Miami Dade

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

Sworn to (or affirmed) and subscribed before me this 19th
day of April, 20 18.

Personally Known: or Produced Identification: _____

Type of Identification Produced: _____



FORM 6

**FULL AND PUBLIC DISCLOSURE
OF FINANCIAL INTERESTS**

2017

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

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:
Martin Luise Krieger

MAILING ADDRESS:
10710 SW 211 St

Rm 2301

CITY: Miami ZIP: 33189 COUNTY: Miami Dade

NAME OF AGENCY:
11th Judicial Circuit

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
Miami Dade County Judge Group 6

CHECK IF THIS IS A FILING BY A CANDIDATE

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PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2017 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 12/31, 20 17 was \$ 1,237,150.

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, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 175,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Residence (address exempt)	700,000
Krieger Family Irrevocable Trust 1	100,000
Albert J. Krieger Irrevocable Trust	260,000
Checking and Savings (Bank of America) SEE ATTACHED continued list	56,000

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Volvo Lease <u>Po Box 70899 Charlotte NC 28272-0899</u>	1350
Suntrust Auto Loan <u>Po Box 291144 Baltimore, MD 21279-1144</u>	7500
Mortgage, Heloc Bank of America <u>Po Box 1650070 Dallas Tx 75265-0070</u>	367,000

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
<u>NA</u>	

PART D -- INCOME

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2017 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

RECEIVED

I elect to file a copy of my 2017 federal income tax return and all W2's, schedules, and attachments. (If you check this box and attach a copy of your 2017 tax return, you need not complete the remainder of Part D.)

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Stoffl Salary	200 E. Gaines St Tallahassee FL 32399	158,000

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

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

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	/	/	/
ADDRESS OF BUSINESS ENTITY	/	/	/
PRINCIPAL BUSINESS ACTIVITY	/	/	/
POSITION HELD WITH ENTITY	/	/	/
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	NA		
NATURE OF MY OWNERSHIP INTEREST			

PART F - TRAINING

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

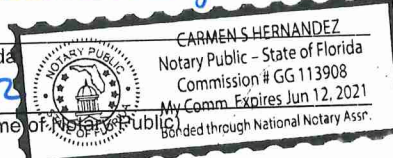
OATH

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 Miami Dade

Sworn to (or affirmed) and subscribed before me this 19th day of April, 2018 by Guise Krueger Martin

(Signature of Notary Public--State of Florida)
Carmen S. Heenandez
(Print, Type, or Stamp Commissioned Name of Notary Public)



Personally Known OR Produced Identification

Type of Identification Produced _____

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

[Signature]

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Signature

Date

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

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



STATE OF FLORIDA
11TH JUDICIAL CIRCUIT

LUISE KRIEGER-MARTIN
COUNTY JUDGE

2017 FORM 6 Assets, continued

Voya US Stock Index 95,000[±]

Coral Gables Deferred Comp, spouse 400,000[±]

Nationwide Retirement spouse 91,000[±]

TELEPHONE (305) 252-5858
FAX (305) 252-5868
LJOWEGERMARTIN@JUD11.FL.COURTS.ORG

SOUTH DADE JUSTICE CENTER
10710 SW 211TH STREET
MIAMI, FLORIDA 33189

*AmFds EuroPacfc Gr R6	12.00%	12.00%	56.1400	197.4763	\$11,086
*AmFds Wshngtn Mut Inv R6	11.00%	11.00%	45.6700	222.0140	\$10,135
*Baird Aggregate Bd Inst	11.00%	11.00%	10.8700	922.0638	\$10,022
*Fid Contra	11.00%	11.00%	122.4700	82.0421	\$10,017
Fixed Assets	9.00%	9.00%			\$8,202
*Lazard US SmMdCap Eq Inst	8.00%	8.00%	14.6500	376.7083	\$5,518
*Opp Devi Mkt I	7.00%	7.00%	42.9300	154.4348	\$8,629
*Vanguard 500 Index Fd AS	8.00%	8.00%	248.8200	29.7466	\$7,342
*Vngrd Infl Prtct Sec Adml	3.00%	3.00%	25.6000	107.0477	\$2,740
*Vngrd Mid-Cap Idx Fd AS	6.00%	6.00%	191.5500	28.7131	\$5,500
*Vngrd Ttl Brd Mkt Idx Adm	8.00%	8.00%	10.7500	677.4341	\$7,282
*Vngrd Ttl IntlStkIdx Adml	8.00%	8.00%	30.5200	244.7812	\$7,470

Loan to Campaign \$10,000
Florida Prepaid Account \$3900

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