

FORM 6

FULL AND PUBLIC DISCLOSURE

2017

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

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:
Leifman - Steven

MAILING ADDRESS:
1351 N.W. 12th Street

Rm. 617

CITY : Miami ZIP : 33125 COUNTY : Miami-Dade

NAME OF AGENCY :
11th Judicial Circuit

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
Miami-Dade County Court Judge - Group 12

CHECK IF THIS IS A FILING BY A CANDIDATE

RECEIVED
 2018 APR 24 AM 11:19
 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

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 April 17, 2018 was \$ 1,711,000.

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 \$ 80,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Primary Residence - Address Exempt	1,100,000
SunTrust Checking Account	25,000
SunTrust Money Market	3,000
T. Rowe Price - Deferred Compensation (See Attached) (Additional Assets Attached)	818,300

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Freedom Mortgage P.O. Box 50428 Indianapolis, IN 46250	350,000
SunTrust Line of Credit 777 Brickell Ave. 2nd Fl Miami, FL 33131	84,235

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
N/A	

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.

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
Judicial Salary	1351 N.W. 12th St. Rm. 617 Miami, FL 33125	134,280
See Attachment		

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
N/A			

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
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 23 day of

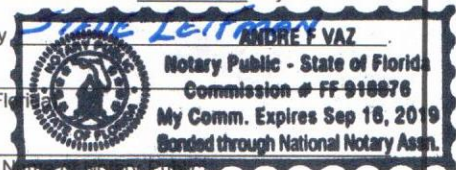
April, 20 18 by ANDRE F VAZ

(Signature of Notary Public--State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification

Type of Identification Produced _____



[Signature]
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

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

Form 6 Full and Public Disclosure of Financial Interests 2017
Judge Steve Leifman
Part B - Assets Continued/Attachment

Assets Individually Valued At Over \$1,000 Continued:	Value of Asset
TD Ameritrade	\$100,000
2 Acres of Property – Park County, CO.	\$40,000
Israel Bonds	\$4,000

Attachments – Description of Assets

T Rowe Price Portfolio

Growth Stock
 International Growth & Income
 New Horizons
 Mid Cap Growth
 Science & Technology
 Small Cap Value

TD Ameritrade Portfolio

Semper Funds	Toews Funds
Sierra Strategic Income Funds	Nuveen Funds
Oppenheimer Funds	Vanguard Funds
SSGA Funds	Invesco Low Volatility Equity Yield Fund

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 ELECTIONS DEPARTMENT

Part D - Income Continued

Miami Int'l Univ. of Art & Design P.O. Box 1315 Pittsburgh, PA 15230	\$4,000
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Teaching Honorariums

Consortium on Innovative Practices P.O. Box 70682 Montgomery, AL 36107	\$5,000
Governors Institute on Substance Abuse 1121 Situs Court, # 320 Raleigh, NC 27606	\$1,500
Credible Partner Conference 1 Choice Hotels Conf. 11 th Fl Rockville, MD 20850	\$2,700
Center for Homeland Defense & Security 1 University Circle Bldg. 220 Rm. 064 Monterey, CA 93943	\$2,000
Lundbeck 6 Parkway North, Deerfield, IL 60015	\$3,000
Greenburger Foundation 55 Fifth Ave., 15 th Fl New York, NY 10003	\$2,000
Ohio Mental Health Conference 9480 SW 147 th St. Miami, FL 33176	\$1,660