

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

RECEIVED
SUPERVISOR OF ELECTIONS
LEON COUNTY, FLORIDA

2018 APR -3 A 11:42

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)

Emily Fritz

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

1433 Vieux Carre Drive
Tallahassee, Florida 32308

4. Telephone

(850) 321-8774

5. E-mail address

emilyfritz@msn.com

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

Leon County Commission District 3

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

10. Name of Treasurer or Deputy Treasurer

J. Randall Graham, CPA

11. Mailing Address

1616 Metropolitan Circle SUITE A

12. Telephone

(850) 385-3711

13. City

Tallahassee

14. County

Leon

15. State

Florida

16. Zip Code

32308

17. E-mail address

jrgcpa@nettally.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Capital City Bank

20. Address

1301 Metropolitan Blvd

21. City

Tallahassee

22. County

Leon

23. State

Florida

24. Zip Code

32308

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

4/3/18

26. Signature of Candidate

X *Emily Fritz*

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

I, J. RANDALL GRAHAM, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/3/2018
Date

X *J. Randall Graham*
Signature of Campaign Treasurer or Deputy Treasurer

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AND DESIGNATION OF CAMPAIGN
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25. Date

4/3/18

26. Signature of Candidate

X *Emily Fritz*

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

I, Emily Fritz, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/3/18

Date

X *Emily Fritz*

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)
(Please print or type)

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SUPERVISOR OF ELECTIONS
LEON COUNTY, FLORIDA
2018 APR -3 A 11:42

I, Emily Fritz,
candidate for the office of Leon County Commission; District 3
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Emily Fritz
Signature of Candidate

4/3/18
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).



MARK S. EARLEY
SUPERVISOR OF ELECTIONS
LEON COUNTY, FLORIDA

May 3, 2018

Certification of Petition Submission & Verification

I, Mark S. Earley, Leon County Supervisor of Elections, do hereby certify that, pursuant to F.S. 99.095, EMILY FRITZ has submitted petitions to have his/her name placed on the ballot for the **2018 Election Cycle** as a non-partisan candidate for the office of LEON COUNTY COMMISSIONER, DISTRICT 3.

Candidate Petition Submission Details

(Contains details for all of the candidate's petitions submitted to the Supervisor of Elections office, regardless of verification status)

Number of petitions **submitted** 504 Date submitted: MAY 18, 2018

Number of valid signatures **required** 416

Number of valid signature **obtained** 416

Method of verification: X Name by Name Random Sample
(DS/DE Rule 1S-2008)

Petition Certification

(Contains details for the candidate's petitions that were verified by the Supervisor of Elections office)

In accordance with F.S. 99.097, the candidate DID obtain ballot position.
did/did not

Verification details:

Number of petitions **validated**: 416

Number of petitions **rejected**: 21

Date signature verification completed: 5/24/2018

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LEON COUNTY, FLORIDA

The bearer of this certificate shall not have to pay the qualifying fee; however, the candidate is still required to complete the qualifying process at the Supervisor of Elections office during the qualifying period.

Certified this 29th day of MAY 2018

Mark S. Earley

Petition Checker

Voter Services Manager

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Do not use this form if a Judicial or School Board Candidate)
Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

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LEON COUNTY, FLORIDA

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Emily Fritz

(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 nonpartisan office of County Commission, 3
(Office) (District #)

 , ; I am a qualified elector of Leon 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 105011724

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.]

X Emily Fritz (850) 321-8774 emilyfritz@msn.com
Signature of Candidate Telephone Number Email Address

1433 View Carré Drive Tallahassee, FL 32308
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Leon

Karen Williams
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me this 18
day of June, 2018.

Personally Known: _____ or Produced Identification:
Type of Identification Produced: Driver's License



OF FINANCIAL INTERESTS

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

FOR OFFICE USE ONLY:

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SUPERVISOR OF ELECTIONS
LEON COUNTY, FLORIDA

LAST NAME — FIRST NAME — MIDDLE NAME:

Fritz M. Emily

MAILING ADDRESS:

1433 Vieux Carre Drive

CITY :

Tallahassee

ZIP :

32308

COUNTY :

Leon

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Leon County Commission, District 3

CHECK IF THIS IS A FILING BY A CANDIDATE

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 May 31, 20 18 was \$ 2,000,106.

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 \$ 35,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

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

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
none	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
none	

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.]

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 LEON COUNTY, FLORIDA

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

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
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

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			
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 Leon

Sworn to (or affirmed) and subscribed before me this 18 day of

June, 2018 by Emily Fritz

Karen Williams
 (Signature of Notary Public--State of Florida)

(Print, Type, or Stamp Commission #)

Personally Known _____

Type of Identification Produced _____



Emily Fritz
 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

Emily Fritz

**Attachment to Form 6, Part B
Assets as of May 31, 2018**

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LEON COUNTY, FLORIDA

Residence, 1433 Vieux Carre Drive \$380,000

2013 Toyota Rav4 \$12,700

Fidelity Investments

P.O. Box 770001

Cincinnati, Ohio 45277-0002

Bristol Myers Squibb 401k \$516,734.28

Rollover IRA \$187,995.19

Roth IRA \$67,838.64

Smith-Bruer Advisors

1809 Miccosukee Commons Drive

Tallahassee, Florida 32308

IRA † 414,902.84

E Trade

P.O. Box 484

Jersey City, New Jersey 07303-0484

Brokerage account \$25,609.72

IRA \$99,336.83

Roth IRA \$134,890.51

Security Benefit

One Security Benefit Place

Topeka, Kansas 66636-0001

Annuity \$112,002.80

SunTrust Bank

3522 Thomasville Road

Tallahassee, Florida 32308

Deposit account \$4,050.23

Regions Bank

2000 Capital Circle NE

Tallahassee, Florida 32308

Deposit account \$9,045.22

Total \$1,965,106

**Attachment to Form 6, Part D
Income**

FL Retirement System	\$8,322.84
FL Optometric Association	\$1,040.14
Tallahassee Community College	\$1,716.00

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LEON COUNTY, FLORIDA



Residency Requirements for Leon County Candidates and Elected Officials

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LEON COUNTY, FLORIDA

County Judges: Must be a resident of Leon County at the time of assuming office.

Advisory Opinion to the Governor No. 65949: "...refer to eligibility at the time of assuming office and not at the time of qualification to office."

Department of State, Division of Elections Advisory Opinion 78-31:

Circuit Court Judge, Bar Membership

"The eligibility requirement...in order to be a circuit court judge must be satisfied as of the time of assuming office, not when qualifying papers are filed or the person elected."

Department of State, Division of Elections Advisory Opinion 92-10:

Preregistration and Subsequent Qualification for Office

"It is well settled in Florida that the statutory oath a person is required to take upon qualifying for office refers to **qualifications applicable when the term of the office he seeks begins**. State ex rel. Fair v. Adams, 139_So.2d_879 (Fla. 1962), Davis ex rel. Taylor v. Crawford, 116_So._41 (1928), State ex rel. Knott v. Haskell, 72 So. 651 (1916)."

Department of State, Division of Elections Advisory Opinion 94-04:

When Qualifications for Selected Offices Must Be Met; Residency

"We remain of the opinion that the qualifications one must possess for public office are **effective at the commencement of the term** of office unless provided otherwise constitutionally, legislatively, or judicially."

Constitutional Officers (Sheriff, Property Appraiser, Clerk of the Court, Supervisor of Elections, and Superintendent of Schools): Must be a resident of Leon County at the time of assuming office.

Department of State, Division of Elections Advisory Opinion 92-10:

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FL Constitution Article 10 Section 3: “...the **residence required when elected or appointed**”

Leon County Commissioners: All candidates for the Leon County Commission must be a resident of the Leon County district for which they seek election to, or for the At-large seats a resident of Leon County at the time of Qualifying.

Leon County Charter Section 2.2(1): *The County Commission.* The governing body of the County shall be a Board of County Commissioners composed of seven (7) members serving staggered terms of four (4) years. There shall be one (1) Commissioner elected for each of the five (5) County Commission districts, established pursuant to general law or by ordinance, and they shall be elected by the electors of that district. There shall be two (2) At-large Commissioners elected on a countywide basis by the electors of the County. Elections for all seven (7) members of the County Commission shall be non-partisan. **Each candidate for the office of district County Commissioner shall reside within the district from which such candidate seeks election at the time of qualifying to run for that office, and during the term of office each Commissioner shall reside in the district from which such Commissioner ran for office, provided that any Commissioner whose residence is removed from a district by redistricting may continue to serve during the balance of the term of office.**

School Board Members: Must be a resident of the School Board district at the time of qualifying for office.

FL Statutes 230.10: **Election of board by districtwide vote.**--The election of members of the school board shall be by vote of the qualified electors of the entire district. **Each candidate for school board member shall, at the time she or he qualifies, be a resident of the school board member residence area from which the candidate seeks election.** Each candidate who qualifies to have her or his name placed on the ballot of the general election shall be listed according to the school board member residence area in which she or he resides.

Tallahassee Mayor and Commissioners: Must be a resident of the City of Tallahassee at the time of qualifying.

City of Tallahassee Charter 7-5(a): Any person who is a resident of the city and is a qualified elector therein may become a candidate for nomination to the office of mayor or city commissioner for the city by **taking and subscribing to an oath or affirmation in substantially the following form and filing the same as provided by state law.**

Before me, an officer authorized to administer oaths and take acknowledgments, personally appeared _____, who being first duly sworn says that he or she is a candidate for nomination for the office of (mayor or city commissioner) for the _____ (unexpired or full) term municipal primary election to be held in the year 20 _____; **that he or she is a resident and qualified elector in the City of Tallahassee;** that he or she is duly qualified to hold office under the constitution and laws of the State of Florida, and that he or she has not violated any of the laws of the city or state relating to primary or general elections or the registration of voters therefore.

City of Tallahassee Charter 7-5(b): **Each candidate, including an incumbent, shall, prior to the end of the qualifying period, file with his eligibility oath** a petition, on forms to be provided by the supervisor of elections, containing the signatures of at least 500 registered electors of the city or pay an election assessment to the supervisor of elections in the amount of one percent of the annual salary of the office sought.

Write-In Candidates: Must reside within the district at the time of their qualifying for office.

2017 FL Statutes 99.0615: Write-In candidate residency requirements. **At the time of qualification,** all write-in candidates must reside within the district represented by the office sought.

I, Emily Fritz, candidate for the office of CC District 3; have read and understand the residency requirements for the office I am seeking.



Candidate Signature