

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

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

(PLEASE PRINT OR TYPE)

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2015 NOV 17 11:52 TWN CLERK

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)

RICHARD M KLEID

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

2660 SOUTH OCEAN BLVD
4035
PALM BEACH, FL 33480

4. Telephone

(561) 588 7631

5. E-mail address

KLEID561@AOL.COM

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

GROUP 1
PALM BEACH TOWN COUNCIL

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

RICHARD M KLEID

11. Mailing Address 2660 SOUTH OCEAN BOULEVARD
4035, PALM BEACH FL, 33480

12. Telephone

(561) 588 7631

13. City

PALM BEACH

14. County

PALM BEACH

15. State

FL

16. Zip Code

33480

17. E-mail address

KLEID561@AOL.COM

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

19. Name of Bank

WELLS FARGO

20. Address

255 SOUTH COUNTY ROAD

21. City

PALM BEACH

22. County

PALM BEACH

23. State

FL

24. Zip Code

33480

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

11/17/15

26. Signature of Candidate

X 

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

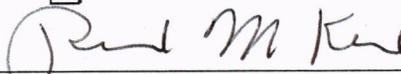
I, RICHARD M KLEID, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11/17/15

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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I, RICHARD KLEID,

candidate for the office of PALM BEACH TOWN COUNCIL GROUP 1

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Richard Kleid

Signature of Candidate

11/17/15

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).

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AFTER CAUCUS

CANDIDATE OATH – NONPARTISAN OFFICE

(Not for use by Judicial or
School Board Candidates)

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, RICHARD KLEID

(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 nonpartisan office of PALM BEACH TOWN COUNCIL PERSON,
(office) (district #)

1 (circuit #); I am a qualified elector of PALM BEACH County, Florida;
(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.

X Richard Kleid

Signature of Candidate

(561) 588-7631

Telephone Number

KLEID561@aol.com

Email Address

2660 SOCFAN BLVD
Address 403 SOUTH

PALM BEACH
City

FL
State

33480
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 112603094

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

R I C H A R D K L E I D

STATE OF FLORIDA
COUNTY OF Palm Beach

Sworn to (or affirmed) and subscribed before me this 4 day of December, 20 15.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

Susan A. Owens
Signature of Notary Public

Print, Type or Stamp County, State, Name of Notary Public
SUSAN A. OWENS
MY COMMISSION #FF074704
EXPIRES December 5, 2017
(407) 398-0153 FloridaNotaryService.com

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2014

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

FOR OFFICE USE ONLY:

RECEIVED

2015 DEC 4 9:22 TWM CLERK

AFTER CAUCUS

LAST NAME -- FIRST NAME -- MIDDLE NAME:
 KLEID RICHARD M

MAILING ADDRESS:
 2660 SOCFAN BLVD, 403 SOUTH
 PALM BEACH 33480 PALM BEACH

CITY: PALM BEACH ZIP: TOWN COUNTY: COUNCIL

NAME OF AGENCY:
 TOWN COUNCILMAN GROUP 1

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
 TOWN COUNCILMAN, GROUP 1

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

****** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ******

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2014 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING:

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
PENSION	JC PENNET COMPANY, INC 40 EVERLOOK PT, LINCOLNSHIRE	RETAIL
SOCIAL SECURITY	1116 60069 WASHINGTON, DC	COURT.
UBS	440 ROYAL PALM WAY PALM BEACH, FL 33480	BANK
WELLS FARGO	4503 AUSTRALIAN AVE	BANK

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
NONE			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NONE

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

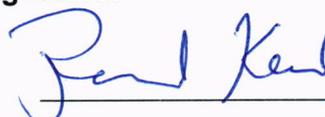
PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions] (If you have nothing to report, write "none" or "n/a")	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
STOCKS, BONDS, MUTUAL FUNDS	UBS, WELLS FARGO ACCOUNTS

PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")	
NAME OF CREDITOR	ADDRESS OF CREDITOR
none	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a")		
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	none	
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		

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

SIGNATURE OF FILER:

Signature: 

Date Signed: 12/4/15

CPA or ATTORNEY SIGNATURE ONLY

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 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

<p>WHAT TO FILE:</p> <p>After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.</p> <p>If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).</p> <p>NOTE: MULTIPLE FILING UNNECESSARY: A candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.</p>	<p>WHERE TO FILE:</p> <p>If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.</p> <p>Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)</p> <p>State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.</p> <p>Candidates file this form together with their qualifying papers.</p> <p>To determine what category your position falls under, see the "Who Must File" Instructions on page 3.</p> <p>Facsimiles will not be accepted.</p>	<p>WHEN TO FILE:</p> <p>Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.</p> <p>Candidates for publicly-elected local office must file at the same time they file their qualifying papers.</p> <p>Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.</p> <p>Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2014.</p>
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Palm Beach County

SUSAN BUCHER
Supervisor of Elections

240 SOUTH MILITARY TRAIL
WEST PALM BEACH, FL 33415
POST OFFICE BOX 22309
WEST PALM BEACH, FL 33416

TELEPHONE: (561) 656-6200
FAX NUMBER: (561) 656-6287
WEBSITE: www.pbcelections.org

CERTIFICATION

I, SUSAN BUCHER, SUPERVISOR OF ELECTIONS, for Palm Beach County, Florida, do hereby certify that **27** signatures on the Petition for Town Council Group No. 1, of RICHARD M. KLEID, are registered electors in the Town of Palm Beach, according to the registration records on file in this office.

This is to further certify that RICHARD M. KLEID is a registered voter in Precinct **7158**, in the Town of Palm Beach, Florida.

Signed, this the 1st, day of December, 2015.

A handwritten signature in cursive script that reads "Susan Bucher".

SUSAN BUCHER
SUPERVISOR OF ELECTIONS
PALM BEACH COUNTY

(SEAL)

A faint, circular seal impression is visible at the bottom left of the page, partially overlapping the text "(SEAL)".

✓ AD RECEIVED

2015 NOV 24 13:26 TWN CLERK

Candidates: Please be sure that your name is on each sheet

TO THE TOWN COUNCIL OF
THE TOWN OF PALM BEACH, FLORIDA:

SUPERVISOR OF ELECTIONS

The undersigned qualified voters of the Town of Palm Beach, Florida, do hereby confirm the nomination of:

2015 NOV 30 AM 11:45

PALM BEACH COUNTY, FL

RICHARD KLEID
(Please print name)

Paul Key
(Please sign)

as Council Member, Group No. 1, regularly made at the Caucus held on December 3, 2015, at Town Hall, Town Council Chambers, 360 S. County Rd., Palm Beach, FL 33480, and do hereby petition your honorable body to place his/her name on the official ballot to be used in the General Election, to be held on March 15, 2016.

	NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY)	SIGNATURE	ADDRESS	DATE OF BIRTH
1 ✓	STEVEN BRONSTEIN	<i>Steven Bronstein</i>	2660 So. Ocean BLVD. 404S	3/17/1943
2 ✓	Thomas MEIER	<i>T Meier</i>	2660 So. Ocean Blvd 703S	8/18/1937
3				
4				
5				
6				
7				
8				
9				

NAME OF CANDIDATE:

RHARD KLEID

GROUP NO.:

1

	NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY)	SIGNATURE	ADDRESS	DATE OF BIRTH
10	Rhoda L. Kleid	Rhoda L. Kleid	2660 S. Ocean Blvd. 4035	6/25/37
11	Best Tomarini	Best Tomarini	49 COCONUT REEF A-510	8/6/26
12	Melissa Agrella	Melissa Agrella	208 Bermuda Lane PB	5/5/61
13	Uchir Kamin	Uchir Kamin	2660 S Ocean	5/16/22
14	LAWE KAMP	Lawe Kamp	44 COCONUT REEF PB	8/13/42
15	TANNER ROSE	Tanner Rose	315 S. Lake Dr. PB	10/17/43
16	SAMUEL CARMICHAEL	Samuel Carmichael	2660 S. Ocean Blvd.	06/13/31
17	Marshall Hoy	Marshall Hoy	200 Bayly Pl	10/10/27
18	MARTIANNE HESS	Marianne Hess	200 Bayly Pl 106	9-16-2
19				
20				
21				
22				
23				
24				
25				

Candidate Name:	RICHARD KLEID		Group No. /
NAME OF REGISTERED VOTER (PLEASE PRINT)	SIGNATURE	ADDRESS	DATE OF BIRTH
✓ W. STRAWERICE		350 S. Corbett Rd.	12/13/26
✓ RENE SILVIN		422 AUSTRALIAN AVE	05/16/48
✓ EDWARD A. COONEY		495 North Lake Way	10/12/85
✓ ROBERT H. HULL		340 ISLAND Rd.	01/14/15
✓ HARRIS N. HOLLIN		2500 S. Ocean Blvd	10/21/31
✓ SANDIE HOLLIN		2500 S. Ocean Blvd.	10-4-16-33
✓ ELLIOT KORBER		2546 WOODRIDGE	5/11/29
✓ JENNIFER KORBER		2544 WOODRIDGE Rd.	3/7/31
✓ ALAN S. ESKIN		2000 So Ocean IDC	6/22/30
✓ RA N. SMITH		3170 S. OCEAN BLVD. Apt N705	2/11/90
✓ MARGARET ZEIDMAN		229 BARTON AVE	12/4/1952
✓ ALFRED P. ADRIANO III		2295 S. Ocean Blvd #223	10/7/52
✓ ROBERT H. HORNICK		2860 S. Ocean #401	8/25/43
✓ WILLIAM F. O'NEIL		2440 S. Ocean #107	10/30/29
✓ TED SCHAAL		3456 So Ocean Blvd 806	1-13-19
✓ Dr. B. Ellen Howe		2295 So. Ocean Blvd PH-20	9-16-44

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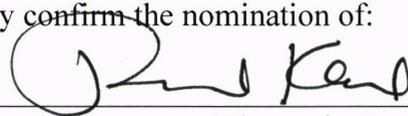
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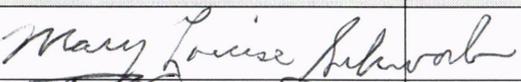
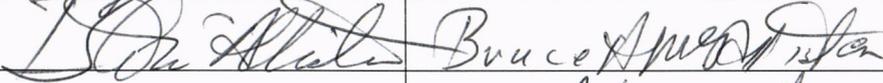
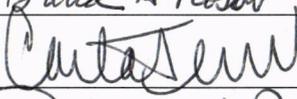
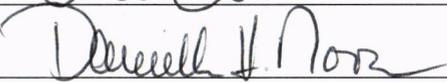
TO THE TOWN COUNCIL OF
THE TOWN OF PALM BEACH, FLORIDA:

The undersigned qualified voters of the Town of Palm Beach, Florida, do hereby confirm the nomination of:

RICHARD KLEID
(Please print name)


(Please sign)

as Council Member, Group No. 1, regularly made at the Caucus held on December 3, 2015, at Town Hall, Town Council Chambers, 360 S. County Rd., Palm Beach, FL 33480, and do hereby petition your honorable body to place his/her name on the official ballot to be used in the General Election, to be held on March 15, 2016.

	NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY)	SIGNATURE	ADDRESS	DATE OF BIRTH
1	Mary Louise Schwab		44 Coconut Row 102B	?
2	Bruce A. M... ..		224 Bahama Lane	10/19/35
3	W. ANTHONY DOWELL	W. Anty Daell	101 East Subt Drive	09-09-1936
4	B.J. Galters	B.J. Galters	2500 S. Ocean Blvd	11/05/32
5	Jean D. Rosow	Jean D Rosow	1460 North Lake Way	8/19/44 02/20/44
6	DAVID A. ROSOW	David A Rosow	1460 N LAKE WAY	10/7/42
7	Carla Termini		2860 S. Ocean Blvd #305	12/27/59
8	Danielle Moore		277 Pendleton Ave	10/20/63
9				

NAME OF CANDIDATE: RICHARD KLEIN GROUP NO.: 1

	NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY)	SIGNATURE	ADDRESS	DATE OF BIRTH
26	Daryl Glenney	<i>Daryl Glenney</i>	2773 S. Ocean Blvd #303	09-17-41
27	Linda Warton	<i>Linda Warton</i>	2295 S. Ocean Blvd #814	7-9-42
28	PHYLLIS C VERDUCCI	<i>Phyllis C Verducci</i>	2295 So Ocean #516	4/20/32
29	BERNARD R PANFEL	<i>Bernard Panfel</i>	3456 So Ocean Blvd 707	7/1/26
30	Danielle H. Moore	<i>Danielle H. Moore</i>	277 Pendleton Ave	10/20/63
31	Michael J. Lucille	<i>Michael J. Lucille</i>	224 Dumber Rd.	9-15-53
32	LEW RAMPOTON	<i>Lew Rampoton</i>	2335 SOUTH OCEAN BLVD 4015	2 NOV 1938
33	GERALD FRANK	<i>Gerald Frank</i>	2784 S. OCEAN BLVD.	7-7-30
34	Nancy L. Amato	NANCY L. AMATO	2580 S. Ocean Blvd.	9-24-38
35	Roberto Mambrius	<i>Roberto Mambrius</i>	2545 S Ocean Blvd #407	10/23
36	Shawn Singh	<i>Shawn Singh</i>	2295 S. Ocean Blvd.	4/6/38
37	Raymond W. Snow	<i>Raymond W. Snow</i>	2335 South Ocean Blvd A-3	10/16/48
38	Jane A. Waldman	<i>Jane Waldman</i>	2774 So Ocean Blvd PA 404	09/22/41
39	MAS G. MASSOUMI	<i>M. G. Massoumi</i>	2660 S. County Rd #704S	1/11/41
40				

I DO HEREBY CERTIFY that there are at least twenty-five (25) qualified electors' signatures herein contained for Candidate Richard Klein, according to the requirements of law, and as verified by the Palm Beach County Supervisor of Elections.

DATED this 4th day of December, 2015.

Susan A. Owens
 Susan A. Owens, MPA, MMC
 Town Clerk

