

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

2019 NOV 6 PM 2:11 TWH CLERK

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I, Bobbie Lindsay,
candidate for the office of Palm Beach Town Council ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X


Signature of Candidate

11-6-2019
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).

**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

2019 NOV 6 PM 2:11 TWN CLERK

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OFFICE USE ONLY

Candidate Oath

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

I, Bobbie Lindsay
(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 Palm Beach Town Council (Office) _____ (District #)

_____ (Circuit #) 3 (Group or Seat #); I am a qualified elector of Palm Beach County, Florida;

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): 112680577

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.]

Baabee Linzee

X B Lindsay (561) 797-9405 Blindsay@townofpalmbeach.com
Signature of Candidate Telephone Number Email Address
212 Caribbean Rd Palm Beach, FL 33480
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Palm Beach

Kathleen Dominguez
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me this 6th day of November, 2019.
Personally Known: or Produced Identification: _____
Type of Identification Produced: n/a



Compound Last Names

If your last name consists of two or more names and has no hyphen, check the box in the Candidate Oath section. If you fail to check the box, your name will be listed with the name appearing last on the line. Example: John Jones Smith – If the last name has no hyphen and you do not check the box, the last name on the ballot would be “Smith”. If you check the box, your last name would be listed on the ballot as “Jones Smith.” If you have a hyphen within your last name, the last name would be listed as “Jones-Smith”.

Guide for Designating Phonetic Spelling of Candidate’s Name for Audio Ballot

1. Use tables below.
2. Use upper case for “stressed” syllables. Use lower case for “unstressed” syllables.
3. Use dashes (-) to separate syllables.
4. Add any notes such as rhyming examples, silent letters, etc.

| Vowels | | | |
|-----------------------|------------------------------|------------------------------------|----------------------------------|
| Stressed Vowel Sounds | | Unstressed Vowel Sounds | |
| EE | (FEET) feet | uh | (SO-fuh) sofa (FING-guhr) finger |
| I | (FIT) fit | | |
| E | (BED) bed | | |
| A | (KAT) cat (KAD) cad | | |
| AH | (FAH-thur) father (PAHR) par | | |
| AH | (HAHT) hot (TAH-dee) toddy | | |
| UH | (FUHJ) fudge (FLUHD) flood | | |
| UH | (CHUHRCH) church | | |
| AW | (FAWN) fawn | Certain Vowel Sounds with R | |
| U | (FUL) full | AHR | (PAHR) par |
| OO | (FOOD) food | ER | (PER) pair |
| OU | (FOUND) found | IR | (PIR) peer |
| O | (FO) foe | OR | (POR) pour |
| EI | (FEIT) fight | OOR | (POOR) poor |
| AI | (FAIT) fate | UHR | (PUHR) purr |
| OI | (FOIL) foil | | |
| YOO | (FYOOR-ee-uhs) furious | | |

| Consonants | | | |
|------------|-------------------|----|-------------------------------------------|
| B | (BED) bed | R | (RED) red |
| D | (DET) debt | S | (SET) set |
| F | (FED) fed | T | (TEN) ten |
| G | (GET) get | V | (VET) vet |
| H | (HED) head | Y | (YET) yet |
| HW | (HWICH) which | W | (WICH) witch |
| J | (JUHG) jug | CH | (CHUCRCH) church |
| K | (KAD) cad | SH | (SHEEP) sheep |
| L | (LAIM) lame | TS | (ITS) its (PITS-feeld) Pittsfield |
| M | (MAT) mat | TH | (THEI) Thigh |
| N | (NET) net | TH | (THEI) Thy |
| NG | (SING-uhr) singer | ZH | (A-zuhr) azure (VI-zuhn) vision |
| P | (PET) pet | Z | (GOODZ) goods (HUH-buhz-tuhn) Hubbardston |

| Examples of Phonetically Spelled Names | |
|----------------------------------------|--------------------------|
| NAME ON BALLOT | PRONOUNCED AS |
| Mishaud | mee-SHO ('d' is silent) |
| Jahn | HAHN (rhyme: fawn) |
| Beauprez | boo-PRAI (rhyme: hooray) |
| Maniscalco | man-uh-SKAL-ko |
| Tangipahoa | TAN-ji-pah-HO-uh |
| Monte | Mahn-TAI |
| Tanya | TAWN-yuh (not TAN) |

Do not submit this page to the filing officer.

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

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

(PLEASE PRINT OR TYPE)

2019 NOV 6 PM 2:11 TOWN CLERK

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

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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)

Barbara (Bobbie) Dona Lindsay

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

212 Caribbean Road
Palm Beach, FL 33480

4. Telephone

(561) 797-9405

5. E-mail address

BLindsay@townofpalmbeach.com

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

Town Council Group 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

Bobbie Lindsay

11. Mailing Address

Same as above

12. Telephone

(())

13. City

''

14. County

''

15. State

''

16. Zip Code

''

17. E-mail address

''

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

19. Name of Bank

Wells Fargo Bank

20. Address

254 Sunrise Ave

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

11-6-2019

26. Signature of Candidate

X [Signature]

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

I, Bobbie Lindsay, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

11-6-2019
Date

X [Signature]
Signature of Campaign Treasurer or Deputy Treasurer



All qualified voters of the town are entitled to be present and to place in nomination such candidates as they desire. For a nomination to be effective, it must be seconded and all nominations and seconds thereto may be made only by qualified voters of the town. (§34-56 Town of Palm Beach Code of Ordinances. Primary nominators please use form below. ~~The names of all primary nominators are due to the Town Clerk by November 26, 2019 by 5:00 PM, so that their voter's registration status may be verified.~~

**TOWN OF PALM BEACH CAUCUS
PRIMARY NOMINATOR FORM**

(Nominator addresses Caucus Chairperson)

Chairperson THOMAS PARKER, I am pleased to nominate, at this
(name)

108th Town Caucus, in 2019, Barbara (Bobbie) Lindsay
(name)

as Town Council Member, Group 3,

who is a registered voter in the Town of Palm Beach, and resides at:

212 CARIBBEAN ROAD, PALM BEACH, FL 33480

My name is: C. EDWARD CARTER

My street address is: 130 Chilean Ave Palm Beach, FL 33480

I confirm that I am a registered voter in the Town of Palm Beach.



REVISED

All qualified voters of the town are entitled to be present and to place in nomination such candidates as they desire. For a nomination to be effective, it must be seconded and all nominations and seconds thereto may be made only by qualified voters of the town. (§34-56 Town of Palm Beach Code of Ordinances.

Primary nominators please use form below. ~~Primary nominators must file with the Town Clerk by November 20, 2019 by 5:00 p.m., so that their voter's registration status may be verified.~~

**TOWN OF PALM BEACH CAUCUS
SECONDER NOMINATOR FORM**

(Nominator addresses Caucus Chairperson)

Chairperson Tom Parker, I am pleased to second the nomination,
(name)

at this 108th Town Caucus, in 2019, of Barbara (Bobbie) Lindsay,
(name)

as Town Council Member, Group 3,

who is a registered voter in the Town of Palm Beach, and resides at:

212 Caribbean Rd. Palm Beach 33480

My name is: Maureen J. Feltman

My street address is: 2860 S. Ocean Blvd #605 PB 33480

I confirm that I am a registered voter in the Town of Palm Beach.



NOV 26 2019 RECEIVED

All qualified voters of the town are entitled to be present and to place in nomination such candidates as they desire. For a nomination to be effective, it must be seconded and all nominations and seconds thereto may be made only by qualified voters of the town. (§34-56 Town of Palm Beach Code of Ordinances. Primary nominators please use form below. ~~The names of all primary nominators are due to the Town Clerk by November 26, 2019 by 5:00 p.m., so that their voter's registration status may be verified.~~

**TOWN OF PALM BEACH CAUCUS
SECONDER NOMINATOR FORM**

(Nominator addresses Caucus Chairperson)

Chairperson THOMAS PARKER, I am pleased to second the nomination,
(name)

at this 108th Town Caucus, in 2019, of Bobbie Lindsay,
(name)

as Town Council Member, Group 3,

who is a registered voter in the Town of Palm Beach, and resides at:

212 Caribbean Road, Palm Beach, FL. 33450

My name is: Keith Beady

My street address is: 395 Caribbean Road, Palm Beach, FL.

I confirm that I am a registered voter in the Town of Palm Beach.

Keith Beady

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

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

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2019 NOV 19 PM 1:47 TOWN CLERK

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

Barbara (Bobbi) Lindsay
(Please print name)

[Signature]
(Please sign)

as Council Member, Group III, regularly made at the Caucus held on December 3, 2019, 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 17, 2020.

| NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY) | SIGNATURE | ADDRESS | DATE OF BIRTH OR VOTER REG. # |
|----------------------------------------------------|--------------------|------------------------------------|----------------------------------|
| 1 DANIELLE K. ROOPE | <u>[Signature]</u> | 277 Pendleton Ave | 10/20/63 |
| 2 WALTER BOWNE | <u>[Signature]</u> | 130 SUNRIS & AVE | 11/15/42 5/1/42 |
| 3 ARND P. ALKHOUD | <u>[Signature]</u> | 2275 S. Ocean Blvd #701 | 10/17/52 |
| 4 Roberto Mendez | <u>[Signature]</u> | 2545 S. Ocean Blvd. 254 | 10/12/36 |
| 5 Lawrence J. Hernandez | <u>[Signature]</u> | 2545 S. Ocean Blvd. | 10/30/29 |
| 6 George Tylander | <u>[Signature]</u> | 225 S County Rd | 5/11/51 |
| 7 William H Tylander | <u>[Signature]</u> | 225 S County Rd | 8/11/42 |
| 8 DANIEL MC DONALD | <u>[Signature]</u> | 4789 S. Ocean Blvd | 9/21/48 |
| 9 Lewis Robertson | <u>[Signature]</u> | 2330 SW 1st Ave | 11/2/38 |

Please be advised that all petitions are considered public record and will be posted on the Town Clerk's webpage. If your address is exempt from disclosure pursuant to the provisions of F.S. Chapter 119, then it is your obligation to notify the Town Clerk's office of same so that the applicable information can be redacted from the public record. You cannot list "Exempt" or other such verbiage as your address for the purposes of this form as the County Supervisor of Elections will not be able to verify that you are a registered voter, and your signature will not count.

NAME OF CANDIDATE FOR TOWN COUNCIL MEMBER, GROUP 3 :

| NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY) | SIGNATURE | ADDRESS | DATE OF BIRTH OR VOTER REG. # |
|----------------------------------------------------|--------------------|-------------------------------------|----------------------------------|
| 10 Gail Connelley | <i>[Signature]</i> | 1139 N. Ocean Blvd | 6/11/54 |
| 11 Margaret J. Fisher | MARGARET A. FISHER | 209 BAYVIEW AVENUE | 12/4/52 |
| 12 Faith Murphy | Faith C. Murphy | 3477 S Ocean Blvd | 9/08/53 |
| 13 William J. O'Leary | <i>[Signature]</i> | 277 Esplanade Way | 3/27/59 |
| 14 Ben McDonald | <i>[Signature]</i> | 44 COCONUT ROW | 11-11-49 |
| 15 Pamela Fisher | Pamela Fisher | 695 1st Street Dr | 12-11-46 |
| 16 Carla Termini | <i>[Signature]</i> | 2800 S. Ocean Blvd 305, Palm Beach | 12-27-59 |
| 17 Douglas J. Buck | <i>[Signature]</i> | 212 Caribbean Rd, Palm Beach FL | 12-06-56 |
| 18 Robert Trishie | <i>[Signature]</i> | 1610 N. Ocean Blvd, PR, f 35480 | 3/16/53 |
| 19 Kristina Trishie | <i>[Signature]</i> | 1610 N Ocean Blvd, Palm Beach 33480 | 7/31/52 |
| 20 Cassandra Keltie | <i>[Signature]</i> | 478 S Ocean Blvd Palm Bch | 3/23/59 |
| 21 David J. Buck | David Street | 1295 S Ocean Blvd | 4/6/50 |
| 22 John Buck | John Buck | 212 Caribbean Rd | 8/9/1948 |
| 23 Gary LeHarris | Gary LeHarris | 201 Bayside Dr | 4/11/43 |
| 24 Meggie Antie | Meggie Antie | 342 Seabreeze Ave. | 10/8/45 |
| 25 Beth Dowdle | Beth Dowdle | 301 CHILWELL AVE | 11-28-50 |

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NAME OF CANDIDATE FOR TOWN COUNCIL MEMBER, GROUP 3 :

| NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY) | SIGNATURE | ADDRESS | DATE OF BIRTH |
|----------------------------------------------------|-------------|-------------------------|------------------------------|
| 26 Sue A. Strickland | [Signature] | 145 Seaspray Avenue | 6/17/52 |
| 27 Snow Baker | [Signature] | 215 Gardner Ln PB | 9-19-54 |
| 28 MARYLYN BOSTON | [Signature] | 1555 N. Lake Way | 8-5-48 |
| 29 Linda L Beatty | [Signature] | 395 Casilbrow Rd. | 3-3-42 |
| 30 Jennifer Wraga | [Signature] | 272 Queens Ln | 10-2-70 |
| 31 Nancy Madson | [Signature] | 499 Brighton Lane 33450 | 03-19-40 |
| 32 [Signature] | [Signature] | 308 Arabian Rd | 09-04-67 |
| 33 Katie Alexander | [Signature] | 214 Queens Ln PB | 6/18/78 |
| 34 Mary Fressly | [Signature] | 210 Sanford Ave PB | 8-2-85 8-19-85 |
| 35 Edward Cooney | [Signature] | 495 N. Lane Way | 10/12/85 |
| 36 Jane Lindsay-Ston | [Signature] | 210 Manana Lane P.B | 12/15/61 |
| 37 Joel Scott | [Signature] | 210 Manana Ln P.B. | 01/30/50 01/30/50 |
| 38 | | | |
| 39 | | | |
| 40 | | | |

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

DATED this _____ day of _____, 201__.

Kathleen Dominguez, CMC
Town Clerk

Please be advised that all petitions are considered public record and will be posted on the Town Clerk's webpage. If your address is exempt from disclosure pursuant to the provisions of F.S. Chapter 119, then it is your obligation to notify the Town Clerk's office of same so that the applicable information can be redacted from the public record. You cannot list "Exempt" or other such verbiage as your address for the purposes of this form as the County Supervisor of Elections will not be able to verify that you are a registered voter, and your signature will not count.

FINANCIAL INTERESTS

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

LINDSAY BARBARA (BOBBIE) DUNA

MAILING ADDRESS :

212 CARIBBEAN ROAD

CITY : ZIP : COUNTY :

PALM BEACH 33480 Palm Beach

NAME OF AGENCY :

Town of Palm Beach

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Town Council Member

2019 NOV 27 AM 10:01 TOWN CLERK

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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, 2018 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 (must check one):

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 |
|------------------------------------------------|----------------------------------|---------------------------------------------------------|
| Jupiter Cove Executive Suites | 1340 US HWY 1, Jupiter, FL 33469 | Commercial Real Estate |
| WB Jupiter FL LLC | 1360 US HWY 1, Jupiter, FL 33469 | Commercial Real Estate |
| CC Owatonna LLC | 2604 Alki Ave SW, Seattle, WA 98 | Commercial + Residential real estate |
| U.S. Government Social Security Administration | Washington DC | Retirement benefit |

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 |
|-------------------------|-------------------------------------------|-------------------|---------------------------------------|
| | | | |
| | | | |
| | | | |

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

| | | |
|--------------------------------|---------------|-----|
| Land Bucks Bay Lots 52153 | Chiefland, FL | 50% |
| Land Greenwood of Chiefland | Chiefland, FL | 50% |

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 |
|---------------------------------|-----------------------------------------------|
| Stock shares in Wells Fargo IRA | Ladder Capital |

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

| NAME OF CREDITOR | ADDRESS OF CREDITOR |
|----------------------|---------------------------------------------------------------------------------|
| Wells Fargo Bank | 450 Australian Ave 450 Australian Ave , West Palm Beach, FL 33401 |
| Valley National Bank | 450 S. Orange Ave., Orlando, FL 32801 |

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")

| NAME OF BUSINESS ENTITY | BUSINESS ENTITY # 1 | BUSINESS ENTITY # 2 |
|-----------------------------------------------|----------------------------|---------------------|
| | 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 G — TRAINING
 For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

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

SIGNATURE OF FILER:

Signature:

Barbara (Bobbie) L. King

Date Signed:

4-26-2019

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:

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics. it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: 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.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2018.