

RECEIVED

2013 DEC 19 15:08 TWN CLERK

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

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) Robert Nelson Wildrick

3. Address (include post office box or street, city, state, zip code) 220 Nightingale Trail Palm Beach, FL 33480

4. Telephone (561) 844-0571

5. E-mail address robertwildrick@hotmail.com

6. Office sought (include district, circuit, group number) Palm Beach 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 Sidney Ritman

11. Mailing Address 720 North County Road, Palm Beach, Florida 33480

12. Telephone (561) 842-4692

13. City Palm Beach

14. County Palm Beach

15. State Florida

16. Zip Code 33480

17. E-mail address sidritman@gmail.com

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

19. Name of Bank Wells Fargo

20. Address 255 S. County Road

21. City Palm Beach

22. County Palm Beach

23. State Florida

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 12/2/13

26. Signature of Candidate X [Signature]

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) I, Sidney Ritman, do hereby accept the appointment (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

12/2/13 Date

X [Signature] Signature of Campaign Treasurer or Deputy Treasurer

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

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

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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)

Robert Nelson Wildrick

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

220 Nightingale Trail
Palm Beach, FL 33480

4. Telephone

(561) 844-0571

5. E-mail address

robertwildrick@hotmail.com

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

Palm Beach 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

Robert N. Wildrick

11. Mailing Address

220 Nightingale Trail, Palm Beach, Florida 33480

12. Telephone

(561) 844-0571

13. City

Palm Beach

14. County

Palm Beach

15. State

Florida

16. Zip Code

33480

17. E-mail address

robertwildrick@hotmail.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

Florida

24. Zip Code

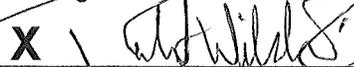
33480

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

12/2/13

26. Signature of Candidate



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

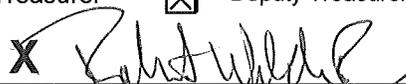
I, Robert N. Wildrick, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

12/2/13

Date



Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

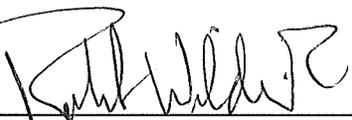
(Please print or type)

OFFICE USE ONLY

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2013 DEC 19 15:08 TOWN CLERK

I, Robert Wildrick,
candidate for the office of Palm Beach Town Council;
Group 3
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X 
Signature of Candidate

12/20/13
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).

RECEIVED

2014 JAN 8 11:21 TWN CLERK

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, Robert Wildrick

(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, N/A,
(office) (district #)

N/A, 3; I am a qualified elector of Palm Beach 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.

X

(561)844-0571

robertwildrick@hotmail.com

Signature of Candidate

Telephone Number

Email Address

220 Nightingale Trail
Address

Palm Beach
City

Florida
State

33480
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 112646146

* 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):

Robert Wildrick

STATE OF FLORIDA

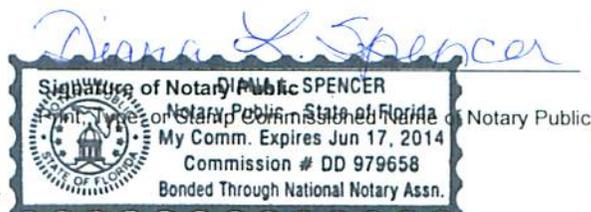
COUNTY OF Palm Beach

Sworn to (or affirmed) and subscribed before me this 2nd day of December, 2013.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____



FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

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

LAST NAME -- FIRST NAME -- MIDDLE NAME:

Wildrick, Robert N.

MAILING ADDRESS:

220 Nightingale Trail

CITY: ZIP: COUNTY:

Palm Beach FL 33480 Palm Beach

NAME OF AGENCY:

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Palm Beach Town Council Group 3

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

RECEIVED

2014 JAN 8 11:21 TWN CLERK

**** 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, 2013 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
Jos. A. Bank Trust	500 Hanover Pike, Hampstead, MD	Retail
U.S. Bonds Trust	Wells Fargo Trust Dept., Palm Beach, FL	Investment
	Treasury Dept., Washington, D.C.	
	Deutsche Bank, Palm Beach, FL	Investment

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
N.A.			

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

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

N.A.

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
N.A.	

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
N.A.	

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	N.A.	
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N.A.	
NATURE OF MY OWNERSHIP INTEREST		

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

SIGNATURE (required):

DATE SIGNED (required):



12-20-13

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.

Signature

Date

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE:

MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, 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.

WHERE TO FILE:

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.

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.)

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.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

WHEN TO FILE:

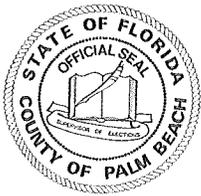
Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment

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 for publicly-elected local office must file at the same time they file their qualifying papers.

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.

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 not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.



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 26 signatures on the Petition for Town Council Group No. 3, of ROBERT N. WILDRICK, 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 ROBERT NELSON WILDRICK is a registered voter in Precinct **1390**, in the Town of Palm Beach, Florida.

Signed, this the 6th, day of January, 2014.



SUSAN BUCHER
SUPERVISOR OF ELECTIONS
PALM BEACH COUNTY

(SEAL)

APPROVED BY CITY CLERK

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

TO THE TOWN COUNCIL OF 2014 JAN -3 PM 3:28
THE TOWN OF PALM BEACH, FLORIDA:

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

Robert Wilnick R. Wilnick
(Please print name) (Please sign)

as Council Member, Group No. 3, regularly made at the Caucus held on January 7, 2014, 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 February 4, 2014.

	NAME OF REGISTERED VOTER (PLEASE PRINT LEGIBLY)	SIGNATURE	ADDRESS
1	WILLIAM R. MILLER	<i>William R. Miller</i>	330 Gordon Court Row, P. B.
2	JOSEPH H CHAMP	<i>Joseph H. Champ</i>	217 Mutual Roads Dr
3	W. ANTHONY DOWELL	<i>W. Anthony Dowell</i>	101 East Golf Drive, P.B.
4	MICHAEL AINSWORTH	<i>Michael Ainsworth</i>	202 Plantation Rd. PB FL
5	WILSON WISHN	<i>Wilson W. Wishn</i>	335 EL VERDADO RD
6	WILLIAM T KEMBLE	<i>William T. Kemble</i>	206 Conitree
7	KAYE K. BAKER	<i>Kaye K. Baker</i>	1246 N. Lake way
8	ROBERT GORVY	<i>Robert Gorvy</i>	200 LEONARDO WAY
9	JOHN SIMPSON	<i>John Simpson</i>	2335 South Ocean Blvd P.B.
10	BRUCE J. WILNICK	<i>Bruce J. Wilnick</i>	224 Bohannon Lane PB

Gorvy, Robert
Simpson, Lewis

YPM
YPM
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YPM

Candidate Name:	NAME OF REGISTERED VOTER (PLEASE PRINT)	SIGNATURE	ADDRESS
1	SIDNEY H. RITMAN	<i>Sidney H. Ritman</i>	720 N. COUNTY RD.
2.	IRENE RITMAN	<i>Irene Ritman</i>	720 N. COUNTY RD.
3.	GAIL CONNOLLY	<i>Gail Connolly</i>	1139 N. OCEAN BLVD.
4	CHRISTIE BELLEW-GANNON	<i>Christie Bellew-Gannon</i>	1300 N. OCEAN BLVD
5	TIM GANNON	<i>Tim Gannon</i>	1300 N. OCEAN BLVD
7	NICOLE'S CONNOLLY	<i>Nicole's Connolly</i>	201 EI DARADO RD.
8	ARISSA CONNOLLY	<i>AriSSa Connolly</i>	201 EI DARADO RD.
9	ROBERT J. OSTRANDER	<i>Robert J. Ostrander</i>	225 EVERGLADE #8
10	REISIELLA D'ALFONSO	<i>ReisIELLA D'Alfonso</i>	225 EVERGLADE AVE. #2
11	BETSY KALLOT	<i>Betsy KalLOT</i>	1570 N. OCEAN BLVD
12	LINDA LANDIS	<i>Linda Landis</i>	184 BRADLEY PLACE
13	MICHAEL SCHAFF	<i>Michael Schaff</i>	225 DUNBAR RD.
14	L. KEL	<i>L. Kel</i>	2015 S. OCEAN
15	JOHN GOONEY	<i>John F. Gooney</i>	495 NO. KREE WY RD

RM

Robert W. Driek - Group No. 3 - Palm Beach Town Council Member 2014 JAN 2 14:58 TOWN CLERK

11	Brendley Freeman	BERDEN FREASE	315 S. LAKE DRIVE, PALM BEACH
12	Nicholas Springer	Richard T. Remington	2185 Hobbs Isle Rd, apt # PB 3348
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2014 JAN - 3 PM 3:28
PALM BEACH COUNTY, FL
SUPERVISOR OF ELECTIONS

RECEIVED

2014 JAN 2 14:58 TOWN CLERK

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2014 JAN - 3 PM 3: 28
PALM BEACH COUNTY, FL

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

DATED this 8th day of January, 2014.


Susan A. Owens, MPA, MMC
Town Clerk