

TOWN OF MELBOURNE BEACH

SPECIAL TOWN COMMISSION MEETING

AUGUST 23, 2023

AGENDA PACKET

TABLE OF CONTENTSAGENDA AUGUST 23, 2023

NEW BUSINESS

- A. Confirm Qualified Commission Candidates and order names to be printed on the November 7, 2023 Municipal Election Ballot
 - Joyce Barton Pages 5-27
 - Alison Dennington Pages 28-54
 - Jason Judge Pages 55-71
 - Adam Meyer Pages 72-87

Town of Melbourne Beach PUBLIC NOTICE

AGENDA

SPECIAL TOWN COMMISSION MEETING WEDNESDAY AUGUST 23, 2023 @ 6:00 pm MASNY ROOM - 507 OCEAN AVENUE

Commission Members:

Mayor Wyatt Hoover Vice Mayor Joyce Barton Commissioner Sherri Quarrie Commissioner Corey Runte Commissioner Marivi Walker

Staff Members:

Manager Elizabeth Mascaro Town Attorney Clifford Repperger Town Clerk Amber Brown

PURSUANT TO SECTION 286.0105, FLORIDA STATUTES, THE TOWN HEREBY ADVISES THE PUBLIC THAT: In order to appeal any decision made at this meeting, you will need a verbatim transcript of the proceedings. It will be your responsibility to ensure such a record is made. Such person must provide a method for recording the proceedings verbatim as the Town does not do so.

In accordance with the Americans with Disability Act and Section 286.26, Florida Statutes, persons needing special accommodations for this meeting shall, at least 5 days prior to the meeting, contact the Office of the Town Clerk at (321) 724-5860 or Florida Relay System at 711.

I. Call to Order

II. Roll Call

III. Pledge of Allegiance and Moment of Silence

IV. Public Comment

After being acknowledged by the Mayor, members of the public should state their name and address for the record. The Commission encourages citizens to prepare their comments in advance. Each individual will have three (3) minutes to address the Commission on any topic(s) related to Town business, not on the Agenda. Please remember to sign the sign-in sheet provided if you will be speaking at the meeting.

V. Old Business

VI. New Business

A. Confirm Qualified Commission Candidates and order names to be printed on the November 7, 2023 Municipal Election Ballot

VII. Adjournment

2023 Municipal Election

November 7, 2023

Mayor, 3-Year Term

Joyce Barton

Alison Dennington

1 At-Large Commissioner, 2-Year Term

(Balance from a vacancy)

Jason Judge

Adam Meyer

Joyce Barton



Town of Melbourne Beach

Candidate Checklist

	<u>November 7, 2023 Election</u> Candidate qualifying period August 14 – August 18, 2023
	Candidate's Name: Joyce D. Barton
	Email: joycedbarton @ gmail.com
	Phone Number: 724-433-7280
	Registered voter in the Town of Melbourne Beach
	Resident for six consecutive months prior to the qualifying date
	Numbers one through five may be submitted before the candidate qualifying dates begin. Numbers six through eight need to be filed during candidate qualifying dates.
	This column is for the Town Clerk Execute and file all forms with the Town Clerk
new	 Appointment of Campaign Treasurer & Designation of Campaign Depository. This <u>MUST</u> be filed before opening a campaign account.
	8/17/23 2. File DS-DE 84 Statement of Candidate within 10 days after filing the DS-DE9
	8/17/23 3. File Town of Melbourne Beach Loyalty Oath. MUST be filed prior to getting signatures.
	8/7/23 4. File TMB-02 Willingness to Serve Statement
newtold	6/17/23 5. File DS-DE 302NP Candidate Oath – Non-Partisan Office
	8/17/23 6. Sign Candidate Forms & Information Receipt
	8/18/23 7. File TMB-01 Nominating Petitions with 25 Signatures of Melbourne Beach registered voters with a check from the campaign checking account
	Mayor Candidate - \$48.00
	Council Candidate - \$41.00
	8/18/23 8. File Form 1 Statement of Financial Interests
105	Note: The Town Clerk is not authorized to interpret election law. Please contact the Brevard County Supervisor of Elections at 321-633-2124 if you have any questions.
	Updated 4/27/2023

507 Ocean Avenue, Melbourne Beach, Florida 32951 (321)724-5860 Phone (321)984-8994 Fax Brevard County's Oldest Beach Community * Established 1883

\cap	\cap
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	AUG 17"23 PM1:1
(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):	OFFICE USE ONLY
	urer/Deputy 🗌 Depository 📋 Office 📄 Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state,
Joyce D. Barton	zip code)
4. Telephone 5. Candidate's Voter Registration #:	- 322 3ª Ave
(724) 433-7280 119668870	Melbourne Beach, FL
(Not required for Qualifying Purposes)	3295/
(Not required for Qualifying Purposes) - Phonetic spelling for audio ballot: F the audio ballot as may be used by persons with disabilities (see instructions on JUHG 01 5 (rhyme: voice)	Print name phonetically on the line below as you wish it to be pronounced on page 2 of this form): B ahr - ton
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Town of Helbourne Beach Mayor	
8 If a candidate for a <u>partisan</u> 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	11. Telephone
Linda Swensen	(321) 917-5118
12. Mailing Address 217 Surf Rd. 13. City	14. State 15. Zip Code
Melbourne Beach Melbourne	
16. I have designated the following bank as my	Primary Depository Secondary Depository
17. Name of Bank PNC Bank	Address 305 Fifth Ave
19. City 20. County	21. State 22. Zip Code
Indialantic Brevard	FL 32951
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE AND DESIGNATION OF CAMPAIGN DEPOSITORY A	
	Signature of Candidate
8-17-23 X	Joyce D. Bailon
25. Treasurer's Acceptance of Appointment (fill	I in the blanks and check the appropriate block)
I, LINDA SWENSEN (Please Print or Type Name)	, do hereby accept the appointment
designated above as: Campaign Treasurer.	Deputy Treasurer.
8/17/23 X =	
	Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE (Section 106.023, F.S.) (Please print or type)	OFFICE USE ONLY
I, Joyce D. Bartor candidate for the office of Town o	f Melbourne Beach Mayor.
have been provided access to read an	d understand the requirements of
Chapter 106, Florida Statutes.	
X June D. Barton Signature of Candidate	<u>8-17-23</u> Date
Each candidate must file a statement with th Appointment of Campaign Treasurer and Desig failure to file this form is a first degree misder Financing Act which may result in a fine of up to Statutes).	nation of Campaign Depository is filed. Willful meanor and a civil violation of the Campaign



TOWN OF MELBOURNE BEACH

BREVARD COUNTY'S OLDEST BEACH COMMUNITY ESTABLISHED 1883

LOYALTY OATH

State of Florida

County of Brevard

I, <u>Joyce D.Barton</u>, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the Town of Melbourne Beach and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Signatu

Sworn to and subscribed before me by means of physical presence or __online notarization, this ______ day of August ______ 2023, by Sayce Barton ______ (Notary Seal) AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025 Signature of Notary Public AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025 Name of Notary Personally known COR Produced Identification____

Type of Identification Produced_



Town of Melbourne Beach

Willingness to Serve Statement

Ref: Town Charter Section 2.02

"I agree to serve if elected."

"I am a candidate for the Office of Mayor for a term of $\underline{3}$ years for the Town of Melbourne Beach, Florida in the Municipal General Election to be held on Tuesday, November 7, 2023."

"I am a qualified elector in the Town of Melbourne Beach, Florida and I have resided in the Town for at least six continuous months immediately prior to the date of qualifying for this office."

Joyce D. Barton Printed Name	Town of Helbourne Beach Mayor Office sought
322 3rd Ave Home Address	
<u>Melbourne Beach, FL 32</u> 95/ City, State, Zip	
Email Email.com	
<u>self-employed</u> Occupation	
<i>"Under penalties of perjury, I declare that I have read true."</i>	d the foregoing and that the facts stated in it are
Dated this <u>17</u> day of <u>Aug</u> , 20 <u>23</u>	Signature of Candidate
STATE OF FLORIDA BREVARD COUNTY	
n n	Seal AMBER L. BROWN Commission # HH 202131
Personally Known or Produced Identification	Expires December 4, 2025
Type of Identification	

Updated 4/11/2023

			ALIG 17 '28 p.1
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			
		OFF	ICE USE ONLY
Can	didate Oath		
	D. 1	Barton	
Name for Ballot: <u>JOYCE</u> / First Middle Na	me/Initial/and/or/Nickname	Last Name	/ Suffix
	e side for Nickname Affidavit.)	Last Name	Sumx
	The Chill		
swear or affirm that I am a candidate for the nonpartisan offic	e of 1000 of revoor (Office)	he beach Mayo.	(District #)
; I am a qualified ele	10 mm	100	county, Florida;
(Circuit #) (Group or Seat #)		· · · · · · · · · · · · · · · · · · ·	
Statement of Outstand	ding Fines, Fees, or Per	nalties	
owe outstanding fines, fees, or penalties, that cumulatively exc			P1(1)(d) = S(b)
	NO, I Do Not 🔀	(
you do, you must also specify the amount owed and each	0- 1	a ravarsa sida	
Signature of Candidate Telephone Nur 322 3 C Ave Hellow		dbarton @gn Email Address	
definess of Legal Residence City	me Beach FL State	- <u>3295</u> ZIP Co	ode
TATE OF FLORIDA			
OUNTY OF BRENOLD	Amo Ch		
	Signature of Notary P Print, Type, or Stamp Com		Public below:
worn to (or affirmed) and subscribed before me by means of nline notarization , OR physical presence			
nline notarization OR physical presence is 2023.	AMBER L. BRO	WN	
	* Commission # HH 2	02131	
ersonally Known C OR Produced Identification	TROFFLOR Expires December 4	, 2025	
pe of Identification Produced:			
DS-DE 302NP (Eff. /2023)		Rule 1S-2	0001 EAC

-

Statement of Outstanding Fines, Fees, or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity

Affidavit o	f Nickname
My legal name is	I am over the age of eighteen (18) and the
contents of this affidavit are true and correct.	
My nickname is	I am generally known by this nickname or have used
it as part of my legal name. I have not created the nickname	I am generally known by this nickname or have used to mislead voters. My nickname does not imply I am some other
person, constitute a political slogan or otherwise associate me	with a cause or issue, or that is obscene or profane.
Signature:	J/A 80%
STATE OF FLORIDA	//
COUNTY OF	
	Signature of Notary Public
Sworn to (or affirmed) and subscribed before me by means of	Print, Type, or Stamp Commissioned Name of Notary Public below:
online notarization 🗌 OR physical presence 🗌	
this day of, 20,	
Personally Known OR Produced Identification	
Type of Identification Produced:	
	—
and the second second second	÷
S-DE 302NP (Eff. /2023)	

CANDIDATE OATH	AUG 17 '23 PML: 13
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	OFFICE USE ONLY
Condid	ate Oath
	(a), Florida Statutes)
1. Joyce D. Barton	
(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 ames). No change can be made after the end of qualifying. allot, the name must be printed above for oath purposes.)
am a candidate for the nonpartisan office of Town of	(Office) (District #)
(<i>Circuit #</i>), (<i>Group or Seat #</i>); I am a qualified elector of	Brevard County, Florida;
have qualified for no other public office in the state, the term of	to hold the office to which I desire to be nominated or elected; I of which office or any part thereof runs concurrent with the office required to resign pursuant to Section 99.012, Florida Statutes; Constitution of the State of Florida.
Candidate's Florida Voter Registration Number (located on y	our voter information card):
ballot as may be used by persons with disabilities (see instructio	on the line below as you wish it to be pronounced on the audio ns on page 2 of this form): [Not applicable to write-in candidates.] B ahr- ton
X force D. Barty (724) 433- Signature of Candidate Telephone Number 322 3rd Ave Helbourne Address City	Email Address
STATE OF FLORIDA	Signature of Notary Public
COUNTY OF Dre Vour O	Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by means of	AMBER L. BROWN
online notarization \Box OR physical presence Δ this $\underline{17}$ day of \underline{AUQUSE} , 2023.	* Commission # HH 202131 FOFFUS
Personally Known OR Produced Identification	
Type of Identification Produced:	-

DS-DE 302NP (Rev. 08/2021)

17



TOWN OF MELBOURNE BEACH, FLORIDA CANDIDATE NOMINATION PETITION

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name <u>Joyce D. Barton</u> be placed on the November 7, 2023, Official Municipal Election Ballot for

2026 Office of the Mayor for a three (3) year term to expire November 2026

Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only		Date	Actual Street Address; (Not a P.O. Box)	Date of Birth or Voter	Print Full Legal Name	
	Signature	Signed	Include Town, State, Zip	Registration #	First & Last Name	1
1.	Elijo alin	3/17/23		4/10/43	Eleftheria Occhi	\checkmark
2.	Jebbla	3/17/23		5/13/66	Hara-Vittoria Wall	ker V
3.	Robert	3/17/23	Melbourebeach FL 32951	2/5/57	121 chard Walke	\sim
4.	Cla of	1720623	400 Polican Kag Nelbourne Booch, FE 32957	12/7/62	Everett SCHUYLER DEDNE	\checkmark
5.	Unteh Defong	8/17/23	400 Pelican Key melbourne Bedon FT 329	5101/4/64	Gretchen Andrea Deja	y V
6.				1	0	0
7.						
8.						
9.						
10.						

Form TMB-01

Page 1



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name <u>Joyce D. Barton</u> be placed on the November 7, 2023, Official Municipal Election Ballot for

- \cancel{p} Office of the Mayor for a three (3) year term to expire November 2026
- Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration, #	Print Full Legal Name First & Last Name
1.	Rape Corm	8/1/2=	328 AUE Mac BCH F2	07/28/55	WATHE CORMIER
2.	Jary Cormies	8/17/2=	328 Ave A Melbch	115108021	MARYACORMIERV
3.	Wint Hoom	8/18/2	3308 Oak St. Melber 329	51 2/19/82	Print Full Legal Name First & Last Name WATHE CORMITR MARY SCORMITR Wyatt HOOVER
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Form TMB-01



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name Joyce D. Barton be placed on the November 7, 2023, Official Municipal Election Ballot for

- Office of the Mayor for a three (3) year term to expire November 2026
- ____ Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	(Not a	treet Address; a P.O. Box) own, State, Zip	Date of Birth or Voter Registration #	Print Full Lega First & Last	
11.	nancy J. nuller	8/17/23	aza Bu	ch Ave Bea	U U/03/48	Nancy Jean	Miller
12.	3ph hle	8/17/23	272 B	WZLANE	5/20/01	Zachcey An	W NILLEV
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name <u>loyce D. Barton</u> be placed on the November 7, 2023, Official Municipal Election Ballot for

- M Office of the Mayor for a three (3) year term to expire November 2026
- ____ Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name
11.	22	811763	217 Surf Rd Melbourne Beach, Fr.	8116/58	LINDA SWENSEN
12.	fee	9/17/23	217 SURF Rd 3295/ NELBOURNE BEACH FI	5119161	THUMAS SUPPOSEN
13.	Mayn Balise	8/17/23	404 Atlantic St. 398 Melbourne Reach, FL	10/27/64	Maryellen Balisi
14.	Fatur Rha	8/17/23	YOY ATLANTIC ST. MELBOURNE BEACH, FL 3295	04/27/66	PATRICK SOTER
15.	Hul	\$/17/23	221 Surf Rd Melbourne Bar, FL3295	12/9/70	Gabor Kishequi
16.	Alz	8/17/23	214 Sont Rd Mel Beach FL 3293/	12/10/17	Adam Meyer
17.	Junfer Del	8/n/23	219 SurfRd. Mel Beach, FL 32951	9/14/69	Jennifer Deal
18.	Ritte	\$/n/23	219 Surl R nel Den Fi 32951	6(3063	Robert Deal
19.	Janie	8/17/2	MELG BCH 30951	9/29/51	SHARON QUARRIE
20.	Good Ath	8/17/23	701 Pinc St. McIb BCH 32951	5/16/2003	Jodi Hoffman

Form TMB-01



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name <u>Joyce D. Barton</u> be placed on the November 7, 2023, Official Municipal Election Ballot for

- _____ Office of the Mayor for a three (3) year term to expire November 2026
- ____ Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Jae Date Signet Date Signet Date Signed Date Signed Date Signed Include Town, State, Zip Registration # Print Full Legal Name First & Last						
1. Jander Signature Signed Include Town, State, Zip Registration # First & Last Name 1. Jander (), attornault 8/17/2623 510 Avenue A Melbourne Beach FL 32951 03121970 Jennifer Offormanelly Melbourne Beach FL 32951 03121970 Jennifer Offormanelly Melbourne Beach FL 32951 03121970 Jennifer Offormanelly Melbourne Beach FL 32951 12-18-56 Nancy Dyer 3. Les 9/17/20 8 NE A Mel Reca 4. Manne Solley Alarun 8-17-23 MELBOURNEBBACHFL 39951 7-29-45 JOANNE Solley HAWSEA 5. Daniel Homen 8-17-23 MELBOURNEBBACHFL 39951 7-29-45 JOANNE Solley HAWSEA 4. Manne Solley Alarun 8-17-23 MELBOURNEBBACHFL 39951 8-4-43 DANIEL H. HANSEA 5. Daniel Homen 8-17-23 MELBOURNE BEACH FL 32951 8-4-43 DANIEL H. HANSEA 5. Joennich 8-17-23 MELBOURNE BEACH FL 32951 8-4-43 DANIEL H. HANSEA 4. Judley Engine 8-17-23 MELBOURNE BEACH FL 32951 8-4-5-51 Shelley Feorguson 5. Joennich 8-17-23 Melbourne Beach FL 3253 5-9-44 Vick: Stein 3. Mellourne Beach FL 3251 3-5-44 Vick: Stein 5. Joennich Stein: 8-17-23 Melbourne Beach, FL 3251 3-5-44 Vick: Stein 5. Joennich 8-17-23 Melbourne Beach, FL 3251 3-5-44 Vick: Stein 5. Joennich 8-17-23 Melbourne Beach, FL 3251 3-5-44 Vick: Stein 6. Jephan Lalbage 8/17/23 Melbourne Beach, FL 3251 3-5-44 Vick: Stein 5. Jephan Lalbage 8/17/23 Melbourne Beach, FL 3251 3-5-44 Vick: Stein 6. Jephan Lalbage 8/17/23 Melbourne Beach, FL 3251 01/15/65 STEPHEN GALLAGHER 5. Joennich 9/12/23 Melbourne Beach, FL 3251 01/15/65 STEPHEN GALLAGHER 5. Jephan Lalbage 8/17/23 Melbourne Beach, FL 3251 01/15/65 STEPHEN GALLAGHER 5. Jephan Lalbage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STEPHEN GALLAGHER 5. Jephan Lalbage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STEPHEN GALLAGHER 5. Jephan Lalbage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STEPHEN GALLAGHER 5. Jephan Lalbage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STEPHEN GALLAGHER 5. Jephan Lalbage 8/17/23 Melbourne Beach AVE MELBol 08/63/29 Elizable 9/19/19/19/19/19/19/19/19/19/19/19/19/19	Clerk Use		Date	,	of Birth or	Print Full Logal Name
1. Janah A. Ottomaulli 8/17/2023 Sto Avenue A Melbourne Beach FL 32951 03121970 Jennifer Ottomanelly Melb. B.ch. 12-18:56 Nancy Dyer Melb. B.ch. 12-18:56 Nancy Dyer Melbourne Beach FL 32951 7-29-49 Michael Attomanelly Melbourne Bolley Haven 8-17-23 H35 RIVERVIEW LANE 12-28-69 Michael Attomanelly HAUNE Jolley Haven 8-17-23 H35 RIVERVIEW LANE 12-28-69 Michael Attomanelly H35 RIVERVIEW LANE 12-28-69 Michael Attomanelly H435 RIVERVIEW LANE 12-28-69 Michael Attomanelly H435 RIVERVIEW LANE 12-28-69 Michael Attomanelly H435 RIVERVIEW LANE 12-28-69 Michael Attomanelly H400000 BERCH FL 32951 7-29-45 JOANNE SOILEY HAWSEN 5. Namily Hawsen 8-17-23 MELBOURNE BEACH FL 32951 8-4-43 DANIEL H. HANSEN 5. Namily Hawsen 8-17-23 Melbourne Beach FL 32951 8-4-43 DANIEL H. HANSEN 435 RIVERVIEW LANE 435 RIVERVIEW LANE 13 Riverview Lan 14 J3 Riverview Lan 14 J3 Riverview Lan 14 J3 Riverview Lan 15 John Ley Fergusan 16 Jack Stein 8-17-23 Melbourne Beach FL 32951 5-7-26 Bernice Both 17 J3 Riverview Lan 18 Jack Stein 8-17-23 Melbourne Beach FL 32951 5-7-26 Bernice Roth 19 Jack Stein 8-17-23 Melbourne Beach FL 32951 5-7-26 Bernice Roth 19 Jack Stein 8-17-23 Melbourne Beach FL 32951 5-7-26 Bernice Roth 19 Jack Stein 8-17-23 Melbourne Beach FL 32951 5-7-26 Bernice Roth 20 Jack Stein 8-17-23 Melbourne Beach FL 32951 01/15/65 STERHEN GALLAGHER 21 Jack Jallage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STERHEN GALLAGHER 22 Glight Jallage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STERHEN GALLAGHER 23 Melbourne Beach FL 32951 01/15/65 STERHEN GALLAGHER 24 Jallage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STERHEN GALLAGHER 24 Jallage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STERHEN GALLAGHER 24 Jallage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STERHEN GALLAGHER 25 Gijabeth Jallage 8/17/23 J319 JRd AVE MELBOL 08/63/39 Edizher Gallage BEACH FL 32951 01/15/65 STERHEN GALLAGHER	Uniy	Signature	Signed			
2. Nancy Dy 8-17-23 517 Ave. A 3. 12-18.56 Nancy Dyer 3. 12-28-69 michael Atomanily 4. Junne Jolley Hanne 8-17-23 MELBOURNEBEACHFL 32951 7-29-45 JOANNE Solley HAWSEN 5. Nanily Housen 8-17-23 MELBOURNE BEACHFL 32951 7-29-45 JOANNE Solley HAWSEN 5. Nanily Housen 8-17-23 MELBOURNE BEACHFL 32951 8-4-43 DANIEL H. HANSEN 5. Nanily Housen 8-17-23 MELBOURNE BEACHFL 32951 8-4-43 DANIEL H. HANSEN 5. JBepnier RUT 8-17-23 MELBOURNE BEACHFL 32951 8-4-43 DANIEL H. HANSEN 6. Jack Star 8-17-23 MELBOURNE BEACHFL 32951 8-4-43 DANIEL H. HANSEN 7. Julie RUT 8-17-23 MELBOURNE BEACHFL 32951 8-4-43 DANIEL H. HANSEN 8. JSepnier RUT 8-17-23 MELBOURNE BEACHFL 32951 8-4-43 DANIEL H. HANSEN 9. Julie Star 8-17-23 MELBOURNE BEACHFL 32951 5-94 Vicki Stering 9. Julie Star 8-17-23 MELBOURNE BEACHFL 32551 3-5-44 Vicki Stering 9. Julie Star 8-17-23 MELBOURNE BEACHFL 32951 01/15/65 STEPHEN GALLAGHER 9. Glyabeth Jallagle 8/17/23 MELBOURNE BEACHFL 32951 01/15/65 STEPHEN GALLAGHER 10. Glyabeth Jallagle 8/17/23 MELBOURNE BEACHFL 32951 01/15/65 STEPHEN GALLAGHER 10. TMB-01	21.	Gerupe G. Ottomaulli	8/17/2023	510 Avenue A Melbourne Beach FL 32951	03121970	
3. 12-29-69 Michael Ottomanile A. Junne Solley Hansen 8-17-23 MELBOURSE BEACHFL 3295/ 7-29-45 JOANNE SOILEY HAWSEN 5. Danielt Komen 8-17-23 MELBOURSE BEACHFL 3295/ 8-4-43 DANIEL H. HANSEN 5. Danielt Komen 8-17-23 MELBOURNE BEACHFL 3295/ 8-4-43 DANIEL H. HANSEN 5. Danielt Komen 8-17-23 MELBOURNE BEACHFL 3295/ 8-4-43 DANIEL H. HANSEN 5. JBennice RUT 8-17-23 MELBOURNE BEACHFL 3295/ 8-4-43 DANIEL H. HANSEN 7. Julie RUT 8-17-23 MELBOURNE BEACHFL 3295/ 8-4-43 DANIEL H. HANSEN 7. Julie RUT 8-17-23 MELBOURNE BEACHFL 3295/ 8-4-43 DANIEL H. HANSEN 7. Julie RUT 8-17-23 MELBOURNE BEACHFL 3295/ 8-1-26 Bernice Both 7. Julie Sterne Ruf 72 3295/ 9-7-26 Bernice Both 8. JUL. Ster 8-17-23 Melbourne Ruf 72 3295/ 9-7-26 Bernice Roth 8. JUL. Ster 8-17-23 Melbourne Ruf 72 3295/ 9-7-5-51 Shelley Fergusen 8. JUL. Ster 8-17-23 Melbourne Ruf 72 3295/ 9-7-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-5-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-15-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-15-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-15-51 Shelley Fergusen 9. Julie Ster 8-17-23 Melbourne Ruf 72 3295/ 9-15-51 Shelley Fergusen 9. Julie Ster 8-100-100 Ster 8-100-100-100-100-100-100-100-100-100-10	22.			Melh. R-h	12-18-56	Nancy Dyer
4. Aburne Solley Harrin 0-17-33 MELBOURNE BEACHFL 3295/ 7-24-45 JOANNE SOILEY HAWSEN 5. Danielt Komen 8-17-23 HISTOREDURE BEACH FL 3295/ 8-4-43 DANIEL H. HANSEN 6. TBENNIC RUTH 8-17-23 MELBOURNE BEACH FL 3295/ 8-4-43 DANIEL H. HANSEN 7. Halley Jengusan 8-17-23 Melbourne Beach FL 3295/ 5-7-26 Bernice Both 433 Riverview Ln 7. Malley Jengusan 8-17-23 Melbourne Beach FL 3295/ 4-5-51 Shelley Fergusan 8. Mich. Stein 8-17-23 Melbourne Beach, FL 3295/ 4-5-51 Shelley Fergusan 8. Mich. Stein 8-17-23 Melbourne Beach, FL 3295/ 4-5-51 Shelley Fergusan 9. Melbourne Beach, FL 3295/ 3-5-44 Vicki Stein 9. Melbourne Beach, FL 3295/ 01/15/65 STEPHEN GALLAGHER 9. Melbourne Beach, FL 3295/ 01/15/65 STEPHEN GALLAGHER	23.	tu	8/17/2		12-28-69	1 1
5. Danielt Kousen 8-17-23 H35 RIDERDIED CANE MELBOURNE BEACH FL 32951 8-4-43 DANIEL H. HANSEN 5. Bernice RUTH 8-17-23 Melbourne Red TZ 32951 8-4-43 DANIEL H. HANSEN 5. Bernice Roth H33 Riverview Ln 7. Melbourne Red TZ 32951 8-9-26 Bernice Both H33 Riverview Ln 8. Melbourne Beh FL 3257 4-5-51 Shelley Ferguson 8. Mile Stei: 8-17-23 Melbourne Beach, FL 3257 4-5-51 Shelley Ferguson 8. Mile Stei: 8-17-23 Melbourne Beach, FL 3257 4-5-51 Shelley Ferguson 9. Melbourne Beach, FL 3257 4-5-51 Shelley Ferguson 9. Melbourne Beach, FL 3251 3-5-44 Vick: Stein 9. Alephan Hollage 8/17/23 Melbourne Beach, FL 32951 01/15/65 STEPHEN GALLAGHER 9. Elizabeth Gallage 8/17/23 Melbourne BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 9. Elizabeth Gallage 8/17/23 Melbourne BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER	24. (Janne Solley Hansen	8-17-23	MELBOURNEBEACHFL 32951	7-29-45	JOANNE SOLLEY HAWSEN
5. 13ephile Collage 8/17-23 Melbourne Red, FZ 32951 5-7-26 Bernice Both H 33 Riverview Ln Halley Jenguson 8-17-23 Melbourne Beh, FL 32957 4-5-51 Shelley Ferguson B. Hills Hellourne Beach, FL 32957 4-5-51 Shelley Ferguson Hoz Pelican Key Hoz Pelican Key Helbourne Beach, FL 32951 3-5-44 Vick: Stein Helbourne Beach, FL 32951 01/15/65 STEPHEN GALLAGHER Helbourne Beach, FL 32951 01/15/65 STEPHEN GALLAGHER D. Glabeth Gallage 8/17/23 Melbourne BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER D. Glabeth Gallage 8/17/23 Melbourne BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER D. Glabeth Gallage 8/17/23 Melbourne BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER D. Glabeth Gallage 8/17/23 Melbourne BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER D. Glabeth Gallage 8/17/23 Melbourne BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER	25.	DanieltKousen	8-17-23	MELBOURNE BEACH FL 32951	8-4-43	
1. Andley Jenguson 8-17-23 Melbourne Beh FL 3257 4-5-51 Shelley Ferguson 3. Ack. Stei: 8-17-23 Melbourne Beach, FL 3251 3-5-44 Vick: Stein 5. Alephan Lallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 6. Chabeth Gallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 6. Chabeth Gallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 6. Chabeth Gallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 6. Chabeth Gallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 6. Chabeth Gallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 6. Chabeth Gallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER 6. Chabeth Gallagen 8/17/23 MELBOURNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER	26.	Bennice RUIZ	8-17-23		5-7-26	Bernice Roth
3. Tick the 8-17-23 402 Pelican Key Albourne Beach, FL3751 3-5-44 Vicki Stein 5. Stephen Holloge 8/17/23 MELBOIRNE BEACH, FL32951 01/15/65 STEPHEN GALLAGHER 6. Chjabeth Gallagho 8/17/233193Rd AVE MELBOH 08/63/39 Eliz ABETH GALAGHER D. TMB-01	27.	Shelley Ferguson	8-17-23	#33 Riverview Ln Melbourge But FL 32551	4-5-51	Shelley Ferguson
D. Chabeth Gallage 8/17/23 MELBOIRNE BEACH, FL 32951 01/15/65 STEPHEN GALLAGHER D. Chabeth Gallage 8/17/233193Rd AVE MELBOH 08/63/39 Eliz BETHGALAGHER DTMB-01	28.	Hick. Ster	8-17-2=	Melbourge Beach, FL3:	81 3-5-44	
TMB-01	29. 🤇	Stephen Hallage	8/17/23		01/15/65	STEPHEN GALLAGHER
n TMB-01	30.	Elizabeth Gallaghor	8/11/23	B319 3Rd AVE MELBOY	08/63/39	ELIZABETH GALAGHER
	m TM	IB-01			<u> </u>	Page 3



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name $\frac{Joyce D.Barton}{D}$ be placed on the November 7, 2023, Official Municipal Election Ballot for

- p_Office of the Mayor for a three (3) year term to expire November 2026
- Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name	
31.	1 AT	8/17/23	206 Flowing Lin	6/12/80	JASON JUDGE	\checkmark
32.	Kuita Juto	08-17-33	402 Riverie lare Fr. 32951	11-09-1990	krista Runte	V
33.	Kelrey Hoffman	s n 23	202 Shannon Are Melburne Bruch F2 32951	12/25/88	Kelsey Hoffman	\checkmark
34.	MAtter	8/11/23	202 SHAMMON AVE MEL BLH, to 32917	3/19/87	MATT HURFWAN	\bigvee
35.	Covery Rente	8-17/23	575 Magnoira Are Melburne Beach, Fi 32911	3-10-91	Casey Runte	\checkmark
36.	Kate L. Walton	08.12.33	515 MAGUOLA ALE MEUBUINE BEALT, FL 32957	7-22-91	KATE WALTON	\neg
37.	Patina E. Rute	8/17/23	409 FIFTH MENUE MELBUNUE BEACH, FL 33951	10/16/60	PATRICIA E. RUNTE	~
38.	an Rt	8/17/73	402 RIVERNEW LANE MEL BCH, FL 32957	03-09-91	COREY RUNTE	
39.	MAHAL	8-17-23	402 SUIF Rd. Malbure Beach, F2 32517	11/22/89	Matthew Novak	\neg
40.	Lationa Blanco	8.11.23	402 Surf Road Meiburne Brach, FL 32157	9/01/95	Tatiana Blanco	
rm TM	B-01					ge 4



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name <u>Joyce D. Barton</u> be placed on the November 7, 2023, Official Municipal Election Ballot for

Office of the Mayor for a three (3) year term to expire November 2026

Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name
31.	Mary P. Jones	8/11/23	512 AVE B. MEL. BCH. F.		First & Last Name MARY PASZTOR JONES
32.	Cmittino	8117/2	SIY Ave B Mel. Bch FL	1-18-85	Courtney Jennings V
33.	Kitang	8/17/23	\downarrow	3/25/81	Jon England
34.	Margaret Durk	8/17/23	523 AveB Mel Bea	ch 10/6/60	MARGARET DURKINV
35.	Berhard Durlem	8/17/2	5 523 Ave B Melbournet	Pach 12/28/58	
36.	Ins A	8/17/23	507 Ave A Mel BI	01/27/82	
37.	disatera	ØInIz	s t	12/8/198	Lisa Dyer V
38.	andrew Mickey	8.17.23	, 506 Ave B MelBh	2.2.81	Andrew MORAY
39.	MANIN	8/17/2	3 EleAvenue By P	- 36187	Shara McKay
40.	Jun M. Copport	8/17/22	, 505 Ave B Bach	1/8/62	Tina M. Coppock
Form TM	B-01				Page 4

Town Clerk's Certification

Municipality: Melbourne Beach, Florida

Total Valid: <u>48</u>

Total Invalid:

I hereby certify that the names of all the petitioners listed as valid appear on the Melbourne Beach, Florida voting list as a qualified voter, and that the candidate filed the petition during the qualifying period.

Signature of Town Clerk

Date 8

Amber Brown, Interim Town Clerk

FORM 1	STATEM	ENT OF	2022
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	FOR OFFICE USE ONLY:
LAST NAME - FIRST NAME - MIDDLE		2007	
Barton Joyce D.	288	9367	
322 3rd Ave			
CITY : Melbourne Beach, FL 32	zip: county: 2951-2536 Br	revard	
NAME OF AGENCY : Melbourne Beach			
NAME OF OFFICE OR POSITION HELI	O OR SOUGHT :		
CHECK ONLY IF 🛛 CANDIDATE		APPOINTEE	
** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU	** THIS SECTION MUS		
	NG REPORTING THRESHOLD G COMPARATIVE THRESHOL	DS, WHICH ARE USUAL	DOLLAR VALUES, WHICH REQUIRES
COMPARATIVE (PE PART A PRIMARY SOURCES OF INC (if you have nothing to report	OME [Major sources of income to the transmission of the sources of	he reporting person - See inst	ructions]
PART A PRIMARY SOURCES OF INC	OME [Major sources of income to the sources of the		
PART A PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE	OME [Major sources of income to the sources of the	he reporting person - See inst IRCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals
PART A - PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME DR Ventures LLC	OME [Major sources of income to the sources of the	he reporting person - See inst IRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
PART A PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322 ,3연 Ave. Me	he reporting person - See inst IRCE'S DRESS 2160)rue Beach, FL Mancial, com	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals
PART A - PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME (DR Ventures LLC incoln Financial Airbnb	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322,3 d Ave. He www.lincolnfi www.airbnb.	he reporting person - See inst IRCE'S DRESS <u>elharme Beach, FL</u> in ancial, com	Tuctions] DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals Investment Hosting
PART A PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME (DR Ventures LLC -incoln Financial Airbnb PART B - SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repo	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322,3 Ave. He いいい、lincoln fi いいい、airbnb. INCOME other sources of income to business rt, write "none" or "n/a")	he reporting person - See inst IRCE'S DRESS Charrie Beach, FL In ancial, com com	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals Investment Hosting rson - See instructions]
PART A PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME (DR Ventures LLC -incoln Financial Airbnb PART B - SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repo	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322,3 d Ave. He www.lincolnfi www.airbnb.	he reporting person - See inst IRCE'S DRESS <u>elharme Beach, FL</u> in ancial, com	Tuctions] DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals Investment Hosting
PART A PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME (DR Ventures LLC incoln Financial Airbab PART B - SECONDARY SOURCES OF [Major customere, clients, and (If you have nothing to report NAME OF	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322,3 Ave. He www.lincaln fi www.airbnb. INCOME other sources of income to business rt, write "none" or "n/a") NAME OF MAJOR SOURCES	he reporting person - See inst IRCE'S See Sone Search, FL In ancial. com com ses owned by the reporting pe ADDRESS	ructions] DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals Investment Hosting rson - See instructions] PRINCIPAL BUSINESS
PART A PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME (DR Ventures LLC incoln Financial Airbanb PART B - SECONDARY SOURCES OF (Major customere, clients, and (If you have nothing to report NAME OF BUSINESS ENTITY	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322,3 Ave. He www.lincaln fi www.airbnb. INCOME other sources of income to business rt, write "none" or "n/a") NAME OF MAJOR SOURCES	he reporting person - See inst IRCE'S See Sone Search, FL In ancial. com com ses owned by the reporting pe ADDRESS	ructions] DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals Investment Hosting rson - See instructions] PRINCIPAL BUSINESS
PART A PRIMARY SOURCES OF INC (If you have nothing to repor- NAME OF SOURCE OF INCOME (DR Ventures LLC incoln Financial Airbab PART B SECONDARY SOURCES OF [Major customere, clients, and (If you have nothing to repor- NAME OF BUSINESS ENTITY NONE PART C REAL PROPERTY [Land, build (If you have nothing to repor-	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322,3 Ave. Me www.lincaln fi www.lincaln fi www.airbnh. INCOME other sources of income to business rt, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME	he reporting person - See inst IRCE'S PRESS 2 harrie Beach, FL anancial. com ses owned by the reporting pe ADDRESS OF SOURCE	ructions] DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals Investment Hosting rson - See instructions] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART A PRIMARY SOURCES OF INC (If you have nothing to report NAME OF SOURCE OF INCOME (DR Ventures LLC incoln Financial Airbnb PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to report NAME OF BUSINESS ENTITY NONE PART C REAL PROPERTY [Land, build (If you have nothing to report S& Delmonico St N	OME [Major sources of income to the t, write "none" or "n/a") SOU ADD 322,3 Ave. Me www.lincaln fi www.lincaln fi www.airbnh. INCOME other sources of income to business rt, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME	he reporting person - See inst IRCE'S PRESS 2 harrie beach, FL anancial. com . com ses owned by the reporting pe ADDRESS OF SOURCE 1 - See instructions] 32907	Tuctions] DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY Rentals Investment Hosting rson - See instructions] PRINCIPAL BUSINESS ACTIVITY OF SOURCE You are not limited to the space on the lines on this form. Attach additional

(If you have nothing to report, write "none" or "n/a TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
none	
	taken (Lands Index)
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	
	the second se
PART F INTERESTS IN SPECIFIED BUSINESSES [Ownershi (If you have nothing to report, write "none" or "n/a")	p or positions in certain types of businesses - See instructions] BUSINESS ENTITY # 1 BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	none none
ADDRESS OF BUSINESS ENTITY	
PRINCIPAL BUSINESS ACTIVITY	and the second
POSITION HELD WITH ENTITY	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	
NATURE OF MY OWNERSHIP INTEREST	
Signature: Jurge D. Bailin Date Signed:	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 C 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.
7-1-23	CPA/Attorney Signature:
	Date Signed:
FILING INSTRUCTIONS:	
If you were mailed the form by the Commission on Ethics or a Supervisor of Elections for your annual disclosure filing, rete form to that location. To determine what category your position under, see page 3 of instructions.	urn the on falls MULTIPLE FILING UNNECESSARY : A candidate who files a For 1 with a qualifying officer is not required to file with the Commissio or Supervisor of Elections.
Local officers/employees file with the Supervisor of Ele of the county in which they permanently reside. (If you permanently reside in Florida, file with the Supervisor of the where your agency has its headquarters.) Form 1 filers who f the Supervisor of Elections may file by mail or email. Conta Supervisor of Elections for the mailing address or email add use. <u>Do not email your form to the Commission on Ethics. it</u> returned.	do not county ile with ct your ress to
State officers or specified state employees who file w Commission on Ethics may file by mail or email. To file b send the completed form to P.O. Drawer 15709, Tallahass	ith the papers. y mail, <i>Thereafter</i> , file by July 1 following each calendar year in which the
32317-5709; physical address: 325 John Knox Rd, Bldg E, S Tallahassee, FL 32303. To file with the Commission by emai your completed form and any attachments as a pdf (do not u other format), send it to CEForm1@leg.state.fl.us and retain	te 200, il, scan leaving office or employment. Filing a CE Form 1F) within 60 days leaving office or employment. Filing a CE Form 1F (Final Stateme of Financial Interacts) does not relieve the filer of filing a CE Form

Į

PAGE 2

CE FORM 1 - Effective: January 1, 2023. Incorporated by reference in Rule 34-8-202(1), F.A.C.

FORM 1		STATEM	IENT OF		2022	
Please print or type your name, mailing address, agency name, and position belo	N:	FINANCIAL	INTEREST	rs 🛛	FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MID	DLE N					
Barton Joyce D.		28	9367			
MAILING ADDRESS : 322 3rd Ave						
CITY : Melbourne Beach, FL	329	revard				
NAME OF AGENCY : Melbourne Beach						
NAME OF OFFICE OR POSITION	HELD	OR SOUGHT :				
CHECK ONLY IF 🔲 CANDIDAT	E OF					
DISCLOSURE PERIOD:	****	THIS SECTION MUS	ST BE COMPLET	ED ****		
THIS STATEMENT REFLECTS	YOUR	FINANCIAL INTERESTS FO	DR CALENDAR YEAR	ENDING DE	ECEMBER 31, 2022.	
FEWER CALCULATIONS, OR L	USIN ISING	G REPORTING THRESHOL COMPARATIVE THRESHO	DS THAT ARE ABSOLI LDS, WHICH ARE USI	JALLY BAS	AR VALUES, WHICH REQUIRES ED ON PERCENTAGE VALUES	
(see instructions for further detail		CENTAGE) THRESHOLDS			UE THRESHOLDS	
PART A - PRIMARY SOURCES OF						
(If you have nothing to	eport,	write "none" or "n/a")				
NAME OF SOURCE OF INCOME			URCE'S DRESS		ESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
KDR Ventures LL	C	322 3rd Ave M	elbourne Beach F			
Lincoln Financi		www.lincolnf			Investment	
Airbnb		www.airbnb			Hosting	
AUGNO					J	
PART B – SECONDARY SOURCE [Major customers, clients (If you have nothing to	, and o	ther sources of income to busine	sses owned by the reportin	ig person - Se	ee instructions]	
NAME OF BUSINESS ENTITY		AME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
none						
none						
PART C - REAL PROPERTY [Land (If you have nothing to I	, buildi	ngs owned by the reporting perso	on - See instructions]		are not limited to the space on the on this form. Attach additional	
588 Delmonico St			32907	sheet	ts, if necessary.	
1449 Lombard St		W. Palm Bay, FI		and	IG INSTRUCTIONS for when where to file this form are ted at the bottom of page 2.	
				this	RUCTIONS on who must file form and how to fill it out n on page 3.	
CE FORM 1 - Effective: January 1, 2023 Incorporated by reference in Rule 34-8,202(1), F.A.		(Continued	on reverse side)	I negu	PAGE 1	

668 5 1

(If you have nothing to report, write "none" or	, bonds, certificates of deposit, etc See in: r "n/a")	structions]
TYPE OF INTANGIBLE	BUSINESS ENTITY TO	WHICH THE PROPERTY RELATES
none		
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or	r "n/a")	
NAME OF CREDITOR	ADDRES	SS OF CREDITOR
none		
Horic		and the second se
PART F — INTERESTS IN SPECIFIED BUSINESSES [Own		sinesses - See instructions]
(If you have nothing to report, write "none" or "		BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	none	none
ADDRESS OF BUSINESS ENTITY	I COLLE	rion.e
PRINCIPAL BUSINESS ACTIVITY		and the second sec
	and the second second second	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		
	Nete annual ethics training pursuant to section VE COMPLETED THE REQ	
I CERTIFY THAT I HA	VE COMPLETED THE REQ	UIRED TRAINING.
I CERTIFY THAT I HA	ONTINUED ON A SEPARATE SHE	UIRED TRAINING. ET, PLEASE CHECK HERE
I CERTIFY THAT I HA	VE COMPLETED THE REQ DISTINUED ON A SEPARATE SHE CPA or ATTO If a certified public accord	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorney he Florida Bar prepared this form for you, he or
I CERTIFY THAT I HA	AVE COMPLETED THE REQ DNTINUED ON A SEPARATE SHE CPA or ATTO If a certified public accord in good standing with the she must complete the I,	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorney he Florida Bar prepared this form for you, he or following statement: , prepared the Cl
I CERTIFY THAT I HA IF ANY OF PARTS A THROUGH G ARE CO <u>SIGNATURE OF FILER:</u> Signature: <u>Jurge D. Bailn</u>	AVE COMPLETED THE REQ DNTINUED ON A SEPARATE SHE CPA or ATTO If a certified public according good standing with the she must complete the I, Form 1 in accordance	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY buttent licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the Cl with Section 112.3145, Florida Statutes, and th . Upon my reasonable knowledge and belief, th
I CERTIFY THAT I HA	COMPLETED THE REQ DNTINUED ON A SEPARATE SHE CPA or ATT If a certified public according good standing with the must complete the l,	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY buttent licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the Cl with Section 112.3145, Florida Statutes, and th . Upon my reasonable knowledge and belief, the e and correct.
I CERTIFY THAT I HA IF ANY OF PARTS A THROUGH G ARE CO <u>SIGNATURE OF FILER:</u> Signature: <u>Jurge D. Bailn</u>	COMPLETED THE REQ DISTINUED ON A SEPARATE SHE CPA or ATT If a certified public according od standing with the must complete the l, must complete the l, Form 1 in accordance instructions to the form disclosure herein is true. CPA/Attorney Signature	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY buttent licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the Cl with Section 112.3145, Florida Statutes, and th . Upon my reasonable knowledge and belief, the e and correct.
I CERTIFY THAT I HA IF ANY OF PARTS A THROUGH G ARE CO <u>SIGNATURE OF FILER</u> : Signature: Jurge D. Barton Date Signed:	COMPLETED THE REQ DISTINUED ON A SEPARATE SHE CPA or ATT If a certified public according good standing with the must complete the l, must complete the l, Form 1 in accordance to instructions to the form disclosure herein is true	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY buttent licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the Cl with Section 112.3145, Florida Statutes, and th . Upon my reasonable knowledge and belief, th e and correct.
I CERTIFY THAT I HA IF ANY OF PARTS A THROUGH G ARE CO <u>SIGNATURE OF FILER</u> : Signature: Jurge D. Barton Date Signed:	COMPLETED THE REQ DISTINUED ON A SEPARATE SHE CPA or ATT If a certified public according od standing with the must complete the l, must complete the l, Form 1 in accordance instructions to the form disclosure herein is true. CPA/Attorney Signature	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorner the Florida Bar prepared this form for you, he or following statement: , prepared the C with Section 112.3145, Florida Statutes, and th . Upon my reasonable knowledge and belief, the e and correct.
I CERTIFY THAT I HA IF ANY OF PARTS A THROUGH G ARE CO SIGNATURE OF FILER: Signature: June D. Bailon Date Signed: 7-1-23 FILING INSTRUCTIONS: If you were mailed the form by the Commission on Ethics	ONTINUED ON A SEPARATE SHE ONTINUED ON A SEPARATE SHE CPA or ATT If a certified public accordin good standing with the she must complete the I, Form 1 in accordance instructions to the form disclosure herein is true Date Signed:	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorner the Florida Bar prepared this form for you, he or following statement: , prepared the C with Section 112.3145, Florida Statutes, and th . Upon my reasonable knowledge and belief, the e and correct.
I CERTIFY THAT I HA IF ANY OF PARTS A THROUGH G ARE CO SIGNATURE OF FILER: Signature: June D. Bailon Date Signed: 7-1-23 FILING INSTRUCTIONS:	ONTINUED ON A SEPARATE SHE ONTINUED ON A SEPARATE SHE CPA or ATT If a certified public accordin good standing with the she must complete the I,	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY Ountant licensed under Chapter 473, or attorne the Florida Bar prepared this form for you, he o following statement:, prepared the C with Section 112.3145, Florida Statutes, and tt . Upon my reasonable knowledge and belief, tt e and correct. e: together with their filing papers. ECESSARY: A candidate who files a Forn r is not required to file with the Commission
I CERTIFY THAT I HA IF ANY OF PARTS A THROUGH G ARE CO <u>SIGNATURE OF FILER:</u> Signature: <u>June</u> , <u>Bailon</u> Date Signed: 7-1-23 FILING INSTRUCTIONS: If you were mailed the form by the Commission on Ethics Supervisor of Elections for your annual disclosure filing form to that location. To determine what category your p	ONTINUED ON A SEPARATE SHE ONTINUED ON A SEPARATE SHE CPA or ATT If a certified public accding od standing with the she must complete the light is	UIRED TRAINING. ET, PLEASE CHECK HERE ORNEY SIGNATURE ONLY Ountant licensed under Chapter 473, or attorne the Florida Bar prepared this form for you, he o following statement:, prepared the C with Section 112.3145, Florida Statutes, and tt . Upon my reasonable knowledge and belief, tt e and correct. e: together with their filing papers. ECESSARY: A candidate who files a Forn r is not required to file with the Commission

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), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2022.

PAGE 2

CE FORM 1 - Effective: January 1, 2023. Incorporated by reference in Rule 34-8.202(1), F.A.C.

Melbourne Beach Town Clerk

From: Sent: To: Cc: Subject: Natalie Lopez <nlopez@votebrevard.gov> Monday, July 3, 2023 2:16 PM Joyce Barton Jennifer Torres RE: Form 1

Good afternoon,

Your Form 1 has been received.

Kind regards, **Natalie Lopez** Voter List Maintenance Specialist Brevard County Supervisor of Elections 321-522-4467

nlopez@votebrevard.gov



From: Joyce Barton <jbarton@melbournebeachfl.org>
Sent: Monday, July 3, 2023 1:08 PM
To: Form 1 <form1@votebrevard.gov>
Cc: Jennifer Torres <townclerk@melbournebeachfl.org>
Subject: Form 1

SECURITY WARNING: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Please find attached Form 1

Respectfully, Joyce Barton

Under Florida law, F. S. 668.6076, e-mail addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing. Según la ley de Florida, F. S. 668.6076, las direcciones de correo electrónico son registros públicos. Si no desea que se divulgue su dirección de correo electrónico en respuesta a una solicitud de registros públicos, no envíe correos electrónicos a esta entidad. En cambio, se puede comunicar con esta oficina por teléfono o por escrito.

T WEL	ROURIS		Receipt:	0000002927	08/18/23	
101 410	ALL THE		Cashier:	JKERR		
Cair.			Received Of:	BARTON, JOYC 322 3RD AVE	E	
			The sum of:	4	8.00	
ELECT	J. BARTON 2023 ELECTIONS					48.00
					Total	48.00
		TENDERED:	Check	8-9/403		48.00

Alison Dennington



neu

Town of Melbourne Beach

Candidate Checklist

November 7, 2023 Election Candidate gualifying period August 14 - August 18, 2023 Candidate's Name: a. 0 Email: Phone Number: Registered voter in the Town of Melbourne Beach Resident for six consecutive months prior to the qualifying date Numbers one through five may be submitted before the candidate qualifying dates begin. Numbers six through eight need to be filed during candidate qualifying dates. This column is for the Town Clerk Execute and file all forms with the Town Clerk 23 1. File DS-DE 9 Appointment of Campaign Treasurer & Designation of Campaign Depository. This **MUST** be filed before opening a campaign account. 2. File DS-DE 84 Statement of Candidate within 10 days after filing the DS-DE9 XA3. File Town of Melbourne Beach Loyalty Oath. MUST be filed prior to getting signatures. 4. File TMB-02 Willingness to Serve Statement 5. File DS-DE 302NP Candidate Oath – Non-Partisan Office 6. Sign Candidate Forms & Information Receipt Nichname Agidavit 7. File TMB-01 Nominating Petitions with 25 Signatures of Melbourne Beach registered voters with a check from the campaign checking account Mayor Candidate - \$48.00 Council Candidate - \$41.00



8. File Form 1 Statement of Financial Interests

Note: The Town Clerk is not authorized to interpret election law. Please contact the Brevard County Supervisor of Elections at 321-633-2124 if you have any questions.

Updated 4/27/2023

\sim	\cap
APPOINTMENT OF CAMPAIGN TREASU 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 before opening the campaign account.	officer 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, La Alison Applewhite Dennir 4. Telephone 5. Candidate's Voter Reg	igton zip code) 413 Sulf Road
(321) 6/6 - 3835 (Not required for Qualifying)	Melbourne Beach FL 32951
(Not required for Qualifying Purposes) - Phonetic spelling for a the audio ballot as may be used by persons with disabilities (see in	
6. Office sought (include district, circuit, group numb Mayor, Town of Melbourne,	
8. If a candidate for a <u>partisan</u> office, check block Write-In No Party Affiliation	
9. I have appointed the following person to act as	my Campaign Treasurer Deputy Treasurer
10. Name of Treasurer or Deputy Treasurer	$\frac{11. \text{ Telephone}}{(321) 616 - 3825}$
12. Mailing Address 413 Surf Road	3. City Melboumebrach 14. State 15. Zip Code Helboumebrach Florida 3295/
16. I have designated the following bank as my	Primary Depository Secondary Depository
	and 314 East Eau Gallie Blvd
19. City Indian Harboysen Drevar	d 21. State 22. Zip Code 339.51
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE	E READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER EPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.
23. Date 08/16/2023	24. Signature of Canodiate
25. Treasurer's Acceptance of Appoi I, Alison Apple white Den (Please Print or Type Name)	intment (fill in the blanks and check the appropriate block) ning for , do hereby accept the appointment
designated above as: Campaign Trea	surer. Deputy Treasurer.
	X CHEAD
Date	Signature of Campaign Treasurer or Deputy Treasurer 3

DS-DE 9 (Rev. 07/23)

\cap	\bigcirc	АЦС 17'23 АКЭ:45 7
STATEMENT OF CANDIDATE (Section 106.023, F.S.) (Please print or type)	OFFICE USE ONLY	
I, <u>Alison Applewhit</u> candidate for the office of <u>Mayor</u> have been provided access to read an	Beau	ume; eh
Chapter 106, Florida Statutes.		
Signature of Candidate	08/17/202 Date	23
Each candidate must file a statement with the Appointment of Campaign Treasurer and Design failure to file this form is a first degree misder Financing Act which may result in a fine of up to Statutes).	nation of Campaign Depository is filed meanor and a civil violation of the C	d. Willful ampaign



TOWN OF MELBOURNE BEACH

BREVARD COUNTY'S OLDEST BEACH COMMUNITY ESTABLISHED 1883

LOYALTY OATH

State of Florida

County of Brevard

Alison Apple white Demington a citizen of the State of Florida and of the United

States of America, and being employed by or an officer of the Town of Melbourne Beach and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Signature

Sworn to and subscribed before me by means of \checkmark physical presence or __online notarization, this <u>17</u> day of <u>August</u> 2023, by <u>Alison Applewhile Denrington</u>

(Notary Seal)



AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025

Signature of Notary Public

Name of Notary

Personally known OR Produced Identification Type of Identification Produced FLD



TOWN OF MELBOURNE BEACH

BREVARD COUNTY'S OLDEST BEACH COMMUNITY ESTABLISHED 1883

LOYALTY OATH

State of Florida

County of Brevard

I, Alison Applewhite Dennington a citizen of the State of Florida and of the United

States of America, and being employed by or an officer of the Town of Melbourne Beach and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

[* Note I am not currently employed! an opicer; rather & a. Candidate for spice.] Signature See also other cloc also signed will acept both Sworn to and subscribed before me by means of physical presence or __online notarization, this 17 day of Angust 2073. by AMBER L. BROWN Signature of Notary Public Commission # HH 202131 (Notary Seal) Expires December 4, 2025 Name of Notary Personally known OR Produced Identification

Type of Identification Produced FL DL



Town of Melbourne Beach

Willingness to Serve Statement

AUG 19/20 AN 10:55

Ref: Town Charter Section 2.02

"I am a candidate for the Office of Mayor for a term of <u>3</u> years for the Town of Melbourne Beach, Florida in the Municipal General Election to be held on Tuesday, November 7, 2023."

"I am a qualified elector in the Town of Melbourne Beach, Florida and I have resided in the Town for at least six continuous months immediately prior to the date of qualifying for this office."

"I agree to serve if elected."

Alison Dennington Printed Name 413 Surf RL	Mayor Office sought
Home Address <u>Melbourne Beach, FL</u> 32 City, State, Zip <u>a.dennington</u> ()(10)	
"Under penalties of perjury, I declare that I have re true." Dated this <u>17</u> day of <u>Augus</u> , 20 <u>23</u>	ad the foregoing and that the facts stated in it are Signature of Candidate
STATE OF FLORIDA BREVARD COUNTY	
Sworn to and subscribed before me by means of	y physical presence or online notarization, 20,2,3, by <u>AltSon Applewhite Dennington</u> Seal Seal AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025

Updated 4/11/2023



.

Town of Melbourne Beach

Willingness to Serve Statement

Ref: Town Charter Section 2.02

.. .

"I am a candidate for the Office of Mayor for a term of <u>3</u> years for the Town of Melbourne Beach, Florida in the Municipal General Election to be held on Tuesday, November 7, 2023."

"I am a qualified elector in the Town of Melbourne Beach, Florida and I have resided in the Town for at least six continuous months immediately prior to the date of qualifying for this office."

"I agree to serve it elected."
Alison Dennington Printed Name 413 Surf RL Home Address Melbourne Beach, FL 32951 City, State, Zip a.dennington
Housewife, Mon, Business Manager, Business Partner/owner Occupation
"Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true." Dated this 17 th day of Augus, 2023 Dated this Signature of Candidate
STATE OF FLORIDA BREVARD COUNTY
Sworn to and subscribed before me by means of physical presence or online notarization, this day of August, 2023, by AltSon Applewhite Denningtor Signature of Notary Public Seal Seal AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025
Personally Known or Produced Identification
Type of Identification FLDL

Updated 4/11/2023

	\cap	AUG 17 23 AHS:45
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		
		OFFICE USE ONLY
Name for Ballot: Alison "A	late Oath <u>Denning</u>	
		lame Suffix
I swear or, affirm that I am a candidate for the nonpartisan office of	e for Nickname Affidavit.) Mayor, Toun of Melb	(District #)
(Circuit #), (Group or Seat #); I am a qualified elector	of Brevued	County, Florida;
I am a qualified elector 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.		
Statement of Outstanding Fines, Fees, or Penalties I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.). YES, I Do NO, I Do Not		
If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.		
2 AS		ngton @ichud.
Signature of Candidate Telephone Number <u>413 Surf Ra</u> <u>Melbourne</u> Address of Legal Residence City	· · · · · · · · · · · · · · · · · · ·	tress 2951
STATE OF FLORIDA SON Apple white Denningt	State	ZIP Code
COUNTY OF brevard	Signature of Notary Public Print, Type, or Stamp Commissioned Name	of Notary Public below:
Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence	ANRY PUR ANDER L DECIMA	
this 17 day of August , 2023	AMBER L. BROWN AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025	
Personally Known OR Produced Identification	COL PLO.	
DS-DE 302NP (Eff/2023)		Rule 15-2.0001, F.A.C. 36
×		

Statement of Outstanding Fines, Fees, or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity
· · · · ·	

Affidavit of Nic	ckname
My legal name is Alison Applewhite D	enningtam over the age of eighteen (18) and the
contents of this affidavit are true and correct.	Ali Dennington)
My nickname is Al Dennington	. I am generally known by this nickname or have used
it as part of my legal name. I have not created the nickname to mis	lead voters. My nickname does not imply I am some other
person, constitute a political slogar or otherwise associate me with	a cause or issue, or that is obscene or profane.
Signature:	
STATE OF FLORIDA	AA B
COUNTY OF Brevard	Signature of Notary Public
Prin Sworn to (or affirmed) and subscribed before me by means of	it, Type, or Stamp Commissioned Name of Notary Public below:
online notarization 🗌 OR physical presence	AMBER L. BROWN
	* Commission # HH 202131
this day of AUGUSE, 2023	Troffor Expires December 4, 2025
Personally Known DOR Produced Identification	
The fide that Did EIN	
Type of Identification Produced: +L DL	

DS-DE 302NP (Eff. _/2023)

\cap	AUG 17 '23 AM3:45
CANDIDATE OATH	
NONPARTISAN OFFICE	
(Do not use this form if a Judicial or School Board Candidate)	
Check box <i>only</i> if you are seeking to qualify as a write-in candidate:	
Write-in candidate	OFFICE USE ONLY
Candid	ate Oath
1, Alison "AL" Dennin	(a), Florida Statutes)
am a candidate for the nonpartisan office of Mayor	Town of Me Bourne Beach
(<i>Circuit #</i>), (<i>Group or Seat #</i>); I am a qualified elector of	
	o hold the office to which I desire to be nominated or elected; I
	f which office or any part thereof runs concurrent with the office
	equired to resign pursuant to Section 99.012, Florida Statutes;
and I will support the Constitution of the United States and the C	Constitution of the State of Florida.
Candidate's Florida Voter Registration Number (located on yo	Dur voter information card): 123864528
Phonetic spelling for audio ballot: Print name phonetically or ballot as may be used by persons with disabilities (see instruction	on the line below as you wish it to be pronounced on the audio ns on page 2 of this form): [Not applicable to write-in candidates.]
	ns on page 2 of this form). [Not applicable to write-in candidates.]
x 2 (321) 616	-3825 a dennington Oiclandin
Signature of Candidate Telephone Number	Email Address
413 Surf Rd Melbourne B	Deuch FL 32951
Address City	State ZIP Code
Alison Applewhite Dennington STATE OF FLORIDA	lent 2
COUNTY OF Brevord	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by means of	AMBER L. BROWN
online notarization OR physical presence this 17 day of Avgreet, 2033	Commission # HH 202131 Expires December 4, 2025
Personally Known OR Produced Identification	
Type of Identification Produced: <u>FLDL</u>	
DS-DE 302NP (Rev. 08/2021)	Rule 1S-2.0001, F.A.C. 38



AFFIDAVIT FOR USE OF NICKNAME

STATE OF FLORIDA COUNTY OF BREVARD

BEFORE ME, the undersigned authority, personally appeared Alson Applewhile Dennington who being first duly sworn or placed under affirmation, says:

1. My legal name is I am over the age of eighteen (18) and the contents of this affidavit are true and correct. yor 2. I am a candidate for the office of nning 3. My nickname is I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. I plan to designate this nickname on my candidate oath as the name I wish to have printed on the ballot when I submit the candidate oath form during the qualifying period for the above office. documents that show that my nickname is one by which I am generally known 4. Attached are or is one that I have used as a part of my legal name: Signature of Affiant Printed/Typed Name of Affiant Sworn to (or affirmed) and subscribed before me bophysical or online _____ presence this day of ADONS Signature of Notary Public AMBER L. BROWN Commission # HH 202131 **Printed Name** Expires December 4, 2025

Produced Identification Type of Identification Produced <u>FLDL</u>

Personally known or

2:48







AUG 17 '23 AM9:45



Al Dennington

Melbourne Beach · since 2016 Welcome Team

stay@home mom, dog-lover, pragmatic



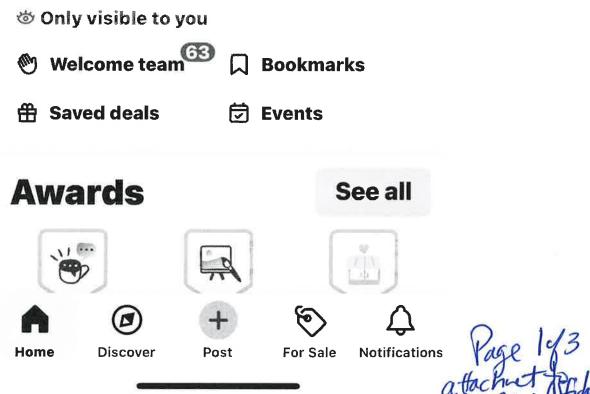
See more



Manage connections a... Blake Lott, Christine Daniels...

C Edit Profile

Dashboard



AUG 17 23 AM9:45

2:51



Al Dennington → \$... ·· Melbourne Beach ·

al 😤

Welcome to the group 🔊. hi everyone - have you ever had a hard time getting actual responsive answers to legit questions about code, laws, ordinances, policy or interpretations? or felt like the town hides the ball or ignores stuff it wants to ignore or just makes stuff up as it goes or that it seems to care way too much about the tiny things but not enough about the big things and yet you feel powerless. well you arent. lets get the word out when they are trying to change a code, slide something thru. lets complain together and protest together and take back our power.

🛇 Melbourne Beach, FL

🌒 1 Neighbor







Al Dennington Author · Melbo... ··· here is my recet experience



Comment



Ø







Home

Discover

Post For Sale

Notifications

2:50

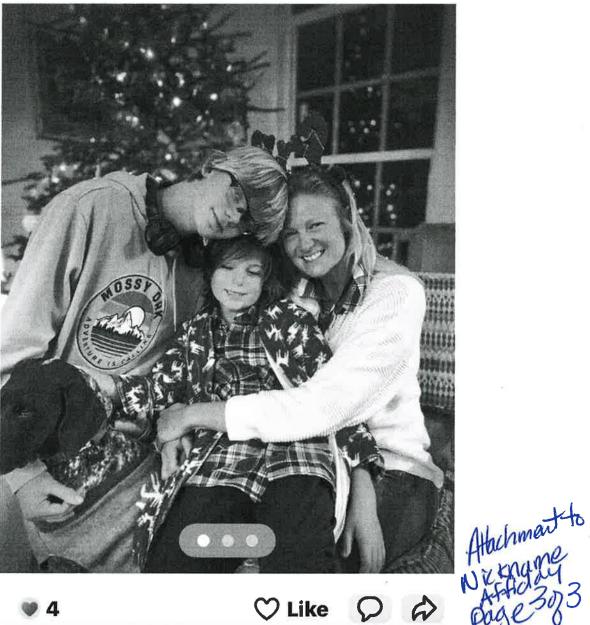
<



🐘 Al Dennington

Melbourne Beach • 33w...

Merry Xmas y'all. It was a really good day. I feel lucky, blessed,... See more





Home



Discover

For Sale Post

Notifications

Affidan 7 Perge + 3prg 2



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name Hison "AI" Denning be placed on the November 7, 2023, Official Municipal Election Ballot for

Office of the Mayor for a three (3) year term to expire November 2026

Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name	
1.	Wend	8/17/2023	Melbourne Beach PL 3295	126437628	MICHELE MUNOZ-BUSTAMANTE	\checkmark
2.	PURE	8/17/202	304 Beau Jean Ave. Melbourne Beach FL 3295		Carlos Munoz-Bustamante	\checkmark
3.	Minum Pocosli	8/17/23=	703 Stlertie Sto Mellow no Beer F.	9/2/1950	Minnie M. Pocoski	
4.	MMAStuni .	8/17/23	314 Augur B MB 72328	17/22/92	Matthew Harris	\checkmark
5.	Stay Hamilton	8/17/23	3 Melbourge Beach 3 MSUNSE BI 32950	1/24/64	Gray Hamitton	X
6.	Bob Umber	8-17-23	SOZ Atlantic FL 32931	7-8.65	Robert E. Unibe	J.X
7. <	A	8/11/23	312 Avenue A Hulbourne Beach FE 32951	11/1/60	John C. Butter	\checkmark
8.	4.5	8/17/23	312 Avenue A melbourne Beach FE 32951	323/60	ANNA E. BUTE	RV
9.	Star by	8/17/23	310 Ave A Melbourne Brach, PL	01/31/89	Stephanic Herron 31 ann	16 com
10.	Willie Brannan	\$17/23	315 Ared MB F132451	05/14/1948	Nellie Brannan	\checkmark
Form TM	4D 01					= 43

Form TMB-01

17

AH9 18 28 AN10:26



9

TOWN OF MELBOURNE BEACH, FLORIDA **CANDIDATE NOMINATION PETITION**

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name Alison Al Dennir be placed of the November 7, 2023, Official Municipal Election Ballot for

✓ Office of the Mayor for a three (3) year term to expire November 2026

____ Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Date Clerk Actual Street Address: of Birth or Use Date (Not a P.O. Box) Voter Print Full Legal Name Only Signed Include Town, State, Zip Signature Registration # First & Last Name 8/11/23 10/24/23 315 AVE A Melbarne Boby Elas 11. Herschel Arthur Samons 94/50 317 Ceret M, OD-RL 12. Etricis Malvean 9/28/86 13. Ave mel beaches C 日月23 4113 Suc F Rd, MEI Bed 9/18/1970 ElvisLaph 14. 1 710 Pine St. Malb Ber 15. 1012 16. Katherine Wilbom 81 17. 123 2/23/55 Katherine S. Wilbon D uve B le melb 23 223 58 18. 19. 122 5/17/23 1202 Pino St. Mchourne 20. 1238-70873 Kempis 44

Form TMB-01

ALIG 18 123 AH10:26

Page 2



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name <u>Alison 'Ar' Dennington</u> be placed on the November 7, 2023, Official Municipal Election Ballot for

- Office of the Mayor for a three (3) year term to expire November 2026
- Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

	Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter , Registration #	Print Full Legal Name First & Last Name	
	21.	Patricia Kempin	8/17/23	1202 Rime At Mello-Bd.	123870921	PATRICIA KEMPIN	$\left \right\rangle$
	22.	Martin	8/17/23		124724010		
-	23.	Jane B. Doodsich	8/17/23	1804 Pine St. Mulb Bch	12-30-1946		\checkmark
	24.	Charly H. Joodrich	8 17 23	1809 PINEST. Met Bale	3-4-1997	ETCharles Goodrich	~
	25.	for Shophino	8/17/202		4794916961 295 K1144969	61 Joan Shephen	d.V
1	26.						
	27.			5 N.			
Z	28.		78				
2	29.						
3	30.						

Form TMB-01

AUG 18 23 AM10:20



3



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name ALison Dennisor Dennisor

- Office of the Mayor for a three (3) year term to expire November 2026
- Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name
21.	Steven O. Watter	8-17-23	416 6 Ave FL 32951	02/02/50	STEVEN OWEN WALTERS V
22.	Marcia L Walter	8,-17-23	416 6th AVE FL 32951 416 6th AVE MEBerror Beach.	10/05/46	MARCIALER WALTERS
23.					
24.					
25.					
26.					
27.					
28.					
29.					
30.					

46

AUG 18 '23 AH 10:26



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name ALr Sun Denning of be placed on the November 7, 2023, Official Municipal Election Ballot for

- \mathcal{M} Office of the Mayor for a three (3) year term to expire November 2026
- Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name
1.	Juan, Marshart	5 /18/23	AR BEAUE, MEL. Beh.FL	4/6/38	
2.	John Handlor	8/18/23	AD LA AVE, MELLER, FL HOUL MELLER, MELLER	9/4/34	John Hamilton Barsh
3.	0				3
4.					
5.					
6.					
7.					
8.					
9.				****	
10.					

AU0 18*23 Ax10:75

Pages Pager



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name ALison Would Grand

- λ Office of the Mayor for a three (3) year term to expire November 2026
 - Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name	
11.	Kemeth J. Felicito	8/11/23	213 CHERRY JRIVE FL 32951	02/09/1953	KENNETH LEBRATO	\checkmark
12.			215 Cherry Drive FL 32951		LAWRENCE E CASSEl	\checkmark
13.	Comelia L. Chosel	8/17/23		08/11/19444	Cornelia L. Cassel	\checkmark
14. <	Susan P. Markin	8/12/23	melh Beh	10	Susan P Martin	\checkmark
15.	Richard ? Martin	\$/17/23	2202 Koewood Dr. 32951	11/17/50	RICHARD T. MARTIN	V
16.						
17.						
18.						
19.						
20.						

Form TMB-01

Poge Page 2

18

RUG 18123 AM10:26



- λ Office of the Mayor for a three (3) year term to expire November 2026
 - Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to "legible writing.

Clerk Use Onły	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name	
11.	gail gowd ,	8/17/23	215 ASH AVE 71 32951	4-26-1951	GAIL L GOWDY	\checkmark
12.	Dynald Dettalle	8-17-23		151 3-12-46	Reynaldo DelValle	\checkmark
13.	Maria T. Select	-8/11/23	2105 Atlauhicstr MB P	2/11/38	MARIA T. EULOTT	×
14.						
15.						
16.			0			
17.						
18.						
19.						
20.						

49

Town Clerk's Certification

Municipality: Melbourne Beach, Florida

Total Valid: 34

Total Invalid: 3

I hereby certify that the names of all the petitioners listed as valid appear on the Melbourne Beach, Florida voting list as a qualified voter, and that the candidate filed the petition during the qualifying period.

Signature of Town Clerk me Amber Brown, Interim Town Clerk

Date

AUG 18 '23 AM10:26

-	1.14
-1	-

Provide the second s		
FORM 1	STATEMENT OF	2022
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERESTS	FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE Dennington, All MAILING ADDRESS 413 SULF Road	son Applewhite	
Melbourne Beach	Beach 32951 Brevard	
Town of Melbour	e Beach (Municipality)	
NAME OF OFFICE OR POSITION HELE Mayor, Tow CHECK ONLY IF CANDIDATE	DR SOUGHT: Bourne Beach	
DISCLOSURE PERIOD:	* THIS SECTION MUST BE COMPLETED R FINANCIAL INTERESTS FOR CALENDAR YEAR END	
FEWER CALCULATIONS, OR USING	EPORTABLE INTERESTS: NG REPORTING THRESHOLDS THAT ARE ABSOLUTE G COMPARATIVE THRESHOLDS, WHICH ARE USUAL CHECK THE ONE YOU ARE USING (must check one):	LY BASED ON PERCENTAGE VALUES
Contraction and All		AR VALUE THRESHOLDS
PART A PRIMARY SOURCES OF INCO	ME [Major sources of income to the reporting person - See inst	tructions] UC does
NAME OF SOURCE OF INCOME	write "none" or "n/a") (Note - J Personally SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S IN PRINCIPAL BUSINESS ACTIVITY
Funde, UC (Member)	413 Surf Rd Melburne Beach	Investment CDS, Security, Red
405 Sunset Blvd, UC (nenser) "" (same)	Real Estate (Longtern Rented)
Surf Acquisi Hons I, U	c " same.	R.E. (Long ter Renthe
Banking - Truit	st 314 East Eau Gallie BIRA ELO	Acent Interest John A
PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repor	other sources of income to businesses owned by the reporting pe	rson - See instructions]
NAME OF BUSINESS ENTITY	IAME OF MAJOR SOURCES ADDRESS OF BUSINESS' INCOME OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Funde, LIC Lon	ytern Really interest 413 Surf.R	LEE Investment REPENTS
405 Sunset Blod, UC Lon	yterm Rental Incole 413 SurFRd	ME RE Invest. Rental 1
SUIFARMISHMSI, DE DI	one yet 413 Sulf Roll	MB, FL none yet
PART C REAL PROPERTY [Land, build (If you have nothing to report,		You are not limited to the space on the lines on this form. Attach additional
413 Suff Rd Me	Ibarne Beach FL 32951	sheets, if necessary.
303 Been Tean AVE	Melbune Beach P2 32957	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.
405 Sunset BIVD	Meboure Deva LFC 32951	INSTRUCTIONS on who must file this form and how to fill it out
JUS ma Ave M	Elbourne Deach, FL 32951	begin on page 3.

	\cap			$\overline{)}$	AUG 17 '23 ANG	
	PART D - INTANGIBLE PERSONAL PROPERTY [S	tocks, bonds, certifica	ates of deposit, etc See in	structions]	1	.2
	(If you have nothing to report, write "no	ne" or "n/a")		-		
			BUSINESS ENTITY TO	WHICH THE PROPERTY RE	ELATES	
	Us and facass Frem	Lynch -	rande, Lac i	Account d' M.	era ILyno	1
	Bank Alents Juist	Funce, U	c, and 405.	Surce Blval, U	Cat Trust	+
	PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "not		5			
	NAME OF CREDITOR	Ĭ	ADDRE	SS OF CREDITOR		
	IRS	11/11 Con	stitution ANE	? NW Washis	tm DC 2022X	
	no operloans, hiab, is debts			1		
	PART F - INTERESTS IN SPECIFIED BUSINESSES		ions is costain types of hu	ningangan Sag instructions		
	(If you have nothing to report, write "none	e" or "n/a")			an (1999) (1997)	
		BUSINI	ESS ENTITY # 1	BUSINESS E	NTITY # 2	
		44126,000	Í.	4126 601 4	All Real	
		915 SULFA	N. S. I. D.C.	Paleshika P	elgune Becch	Λ
	PRINCIPAL BUSINESS ACTIVITY		Various incl. KE	KEAL ESTATE AVE	19 Long Remine	ę
	POSITION HELD WITH ENTITY		o co-manager	Wember and	Manager	
	I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		A	785		
,	NATURE OF MY OWNERSHIP INTEREST	Menberd	nanager of CCC	livenser a win	hazer	_
*	PART G — TRAINING For elected municipal officers agency created under Part III, Chapter 163 required to				redevelopment	la
N		-				â.
South						E.
10rdix	IF ANY OF PARTS A THROUGH G AR	E CONTINUED O	ON A SEPARATE SHE	ET, PLEASE CHECK	HERE D	al
V ATI						
not the	SIGNATURE OF FILE	<u>ER:</u>	CPA or ATT	<u>ORNEY SIGNATUI</u>	RE ONLY	21
lecter		<u>ER:</u>	If a certified public acco	ountant licensed under Chap	ter 473, or attorney	3)
electer	Signature:	<u>=R:</u>	If a certified public acco	ountant licensed under Chap he Florida Bar prepared this	ter 473, or attorney	3)
e lecter rold		<u>R:</u>	If a certified public according good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement:	ter 473, or attorney form for you, he or , prepared the CE	3)
e contra		<u>R:</u>	If a certified public according good standing with the she must complete the I,Form 1 in accordance of instructions to the form	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl	ter 473, or attorney form for you, he or prepared the CE da Statutes, and the	3)
e lecter	Signature:	<u>R:</u>	If a certified public according good standing with the she must complete the I,Form 1 in accordance of the standard stand	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl	ter 473, or attorney form for you, he or prepared the CE da Statutes, and the	3
e lecter		<u>R:</u>	If a certified public according good standing with the she must complete the I,Form 1 in accordance of instructions to the form	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct.	ter 473, or attorney form for you, he or prepared the CE da Statutes, and the	3 J
e lecter Peter	Signature:	<u>R:</u>	If a certified public acco in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct.	ter 473, or attorney form for you, he or prepared the CE da Statutes, and the	3
e lecter	Signature: Date Signed: 08/17/2023	<u>R:</u>	If a certified public according good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct.	ter 473, or attorney form for you, he or prepared the CE da Statutes, and the	3 Jackson
e lecter	Signature: Date Signed: 08/17/2023 FILING INSTRUCTIONS:		If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct.	ter 473, or attorney form for you, he or prepared the CE da Statutes, and the edge and belief, the	3 Artitur
	Signature: Date Signed: 08/17/2023	thics or a County	If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct. e: together with their filing p	ter 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the	3 J
e lecter	Signature: Date Signed: 08/17/2023 FILING INSTRUCTIONS: If you were mailed the form by the Commission on E Supervisor of Elections for your annual disclosure form to that location. To determine what category y	thics or a County filing, return the rour position falls	If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct. e: together with their filing p ECESSARY: A candidate is not required to file with	prepared the CE da Statutes, and the edge and belief, the papers.	3 Junio
e le cher	Signature: Date Signed: 08/17/2023 FILING INSTRUCTIONS: If you were mailed the form by the Commission on E Supervisor of Elections for your annual disclosure form to that location. To determine what category y under, see page 3 of instructions. Local officers/employees file with the Supervise	thics or a County filing, return the rour position falls sor of Elections	If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct. a: together with their filing p IECESSARY: A candidate is not required to file with s.	papers. who files a Form the CE bases ba	3 milita
C Lector	Signature: Date Signed: 08/17/2023 FILING INSTRUCTIONS: If you were mailed the form by the Commission on E Supervisor of Elections for your annual disclosure form to that location. To determine what category y under, see page 3 of instructions. Local officers/employees file with the Supervise of the county in which they permanently reside.	thics or a County filing, return the rour position falls sor of Elections (If you do not	If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowle and correct. e: together with their filing p ECESSARY: A candidate is not required to file with s. y, each local officer/emplo ployee must file within	papers. who files a Form the Commission by the cell the belief, the the commission by the commission	3 Junio
e le contra	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with	If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowl e and correct. e: together with their filing p IECESSARY: A candidate is not required to file with s. y, each local officer/emplo ployee must file within thment or of the beginnin	ter 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the papers. e who files a Form in the Commission by ee, state officer, 30 days of the g of employment.	3 Jon
C Lector	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with ail. Contact your email address to	If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowle and correct. e: together with their filing p ECESSARY: A candidate is not required to file with s. y, each local officer/emplo ployee must file within	ter 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the papers. e who files a Form in the Commission by ee, state officer, 30 days of the g of employment. e must file prior to	3 Junio
e le contra	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with ail. Contact your email address to Ethics, it will be	If a certified public according good standing with the she must complete the l,	together with their filing p ple Elosida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowle e and correct. e: together with their filing p ECESSARY: A candidate is not required to file with s. y, each local officer/emplo ployee must file within itment or of the beginnin e confirmed by the Senate is less than 30 days from	ter 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the papers. e who files a Form in the Commission bygee, state officer, 30 days of the g of employment. e must file prior to in the date of their	3 milita
	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with ail. Contact your email address to Ethics, it will be who file with the	If a certified public accd in good standing with the she must complete the I,	ountant licensed under Chap he Florida Bar prepared this following statement: with Section 112.3145, Florid Upon my reasonable knowle and correct. e: together with their filing p ECESSARY: A candidate is not required to file with s. y, each local officer/emplo ployee must file within the to of the beginnin e confirmed by the Senate is less than 30 days from t the same time they fil	ter 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the papers. e who files a Form in the Commission by ee, state officer, 30 days of the g of employment. e must file prior to in the date of their e their qualifying	3 Junio
e le cient	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with ail. Contact your email address to Ethics, it will be tho file with the To file by mail.	If a certified public accd in good standing with the she must complete the I,	together with their filing p ple Elosida Bar prepared this following statement: with Section 112.3145, Florid . Upon my reasonable knowle e and correct. e: together with their filing p ECESSARY: A candidate is not required to file with s. y, each local officer/emplo ployee must file within itment or of the beginnin e confirmed by the Senate is less than 30 days from	ter 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the papers. e who files a Form in the Commission by ee, state officer, 30 days of the g of employment. e must file prior to in the date of their e their qualifying	3 John Martin
e serent	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with ail. Contact your email address to Ethics, it will be tho file with the To file by mail, Tallahassee, FL Bldg E, Ste 200, by compil coord	If a certified public accd in good standing with the she must complete the I,	together with their filing p be confirmed by the Senate source must file within together with their filing p ECESSARY: A candidate is not required to file within the same time they file the same time they file following each calendar y losure form (Form 1F) y	ther 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the edge and belief, the seven files a Form in the Commission by ee, state officer, 30 days of the g of employment. e must file prior to in the date of their e their qualifying year in which they within 60 days of	3 militad
e le cient	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with ail. Contact your email address to Ethics. it will be tho file with the To file by mail, Tallahassee, FL Bldg E, Ste 200, n by email, scan (do not use any	If a certified public according good standing with the she must complete the form disclosure herein is true. CPA/Attorney Signature Date Signed:	together with their filing p ECESSARY: A candidate ployee must file within the same time they fil following each calendar y together solver form 1F) y here the same time they fil following each calendar y losure form (Form 1F) y here to filing a CE Form 1F) y	ther 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the papers. who files a Form in the Commission by ee, state officer, 30 days of the g of employment. e must file prior to in the date of their e their qualifying year in which they within 60 days of f (Final Statement	3 John Martin
e le contra	Signature: Date Signed: Date	thics or a County filing, return the rour position falls sor of Elections (If you do not sor of the county lers who file with ail. Contact your email address to Ethics, it will be tho file with the To file by mail, Tallahassee, FL Bldg E, Ste 200, In by email, scan (do not use any nd retain a copy Choose only one	If a certified public according good standing with the she must complete the form disclosure herein is true. CPA/Attorney Signature Date Signed:	together with their filing p be confirmed by the Senate source must file within together with their filing p ECESSARY: A candidate is not required to file within the same time they file the same time they file following each calendar y losure form (Form 1F) y	ther 473, or attorney form for you, he or , prepared the CE da Statutes, and the edge and belief, the edge and belief, the papers. who files a Form in the Commission byee, state officer, 30 days of the g of employment. e must file prior to in the date of their e their qualifying year in which they within 60 days of (Final Statement illing a CE Form 1	3 milita

CE FORM 1 - Effective: January 1, 2023. Incorporated by reference in Rule 34-8.202(1), F.A.C.

TE Torm 1 - (continue to page 3) For Candidate see check mark on page 2 3 CE Form 1 间接 17 29 回日:45 Alison Dennington Part F: Busiliess Entity #3 Surf Acquisitions 1, LLC Name 413 Surf Rd Melboure Beach, FR 32951 Address Real Estate Investig Long term Pertal Principal Actuat Member d Manager Position yes Member and Manager guc Own male Than 5% nature 3 Ouvership 2010 08/17/2023 Page 3 53

<u>éren</u> i	A. DENNINGTON 2023 ELECT			Total	48.0
ELECT	A. DENNINGTON 2023 ELECTI				48.
		The sum of:		48.00	
CA.Z		Received Of:	ALISON DENNI 413 SURF RD	NGTON	
10110	ALL THE REAL	Cashier:	JKERR		
E HE	BOURK	Receipt:	000002925	08/18/23	

Jason Judge



Town of Melbourne Beach

Candidate Checklist

	<u>November 7, 2023 Election</u> Candidate qualifying period August 14 – August 18, 2023
	Candidate's Name:lason Judge
	Email: Uscreen a cfl. or com
	Phone Number: 371 508 5116
	Registered voter in the Town of Melbourne Beach
	Resident for six consecutive months prior to the qualifying date
	Numbers one through five may be submitted before the candidate qualifying dates begin. Numbers six through eight need to be filed during candidate qualifying dates.
	This column is for the Town Clerk Execute and file all forms with the Town Clerk
new	BIG 1. File DS-DE 9 Appointment of Campaign Treasurer & Designation of Campaign Depository. This MUST be filed before opening a campaign account.
	2. File DS-DE 84 Statement of Candidate within 10 days after filing the DS-DE9
	3. File Town of Melbourne Beach Loyalty Oath. <u>MUST</u> be filed prior to getting signatures.
	8/11/2/23 4. File TMB-02 Willingness to Serve Statement
event	S. File DS-DE 302NP Candidate Oath – Non-Partisan Office
U.C.	8. Sign Candidate Forms & Information Receipt
	 File TMB-01 Nominating Petitions with 25 Signatures of Melbourne Beach registered voters with a check from the campaign checking account
	Mayor Candidate - \$48.00
	Council Candidate - \$41.00
	8. File Form 1 Statement of Financial Interests
	Note: The Town Clerk is not authorized to interpret election law. Please contact the Brevard County Supervisor of Elections at 321-633-2124 if you have any questions.

Updated 4/27/2023

56

\cap	\bigcirc
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	ALKS 18 23 PX1:24
(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:	surer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip code)
4. Telephone 5. Candidate's Voter Registration #	- 766 Fleminger LA
(3c1) 568 5116 100 86 0 26 Z (Not required for Qualifying Purposes)	766 Fleminger LA Melbourne Beh FC 32951
(Not required for Qualifying Purposes) - Phonetic spelling for audio ballot: the audio ballot as may be used by persons with disabilities (see instructions on AI S Uh n	Print name phonetically on the line below as you wish it to be pronounced on page 2 of this form):
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Commission Tan of Melborn 3 8. If a candidate for a <u>partisan</u> office, check block and fill in	
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 Jasu Jasu 12. Mailing Address 206 Flummer 16. How depined the following back on the second secon	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
16. I have designated the following bank as my Image: Comparison of the following bank as my 17. Name of Bank Image: Comparison of the following bank as my	Primary Depository Secondary Depository
	40 N Horber (ty B/10
19. City 20. County Market County	21. State 22. Zip Code 37.975
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE AND DESIGNATION OF CAMPAIGN DEPOSITORY	FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER
	I. Signature of Candidate
6/16/27 X	11th
25. Treasurer's Acceptance of Appointment (fi	ill in the blanks and check the appropriate block), do hereby accept the appointment
designated above as: Campaign Treasurer.	Deputy Treasurer.
X	Signature of Campaign Treasurer or Deputy Treasurer 57
DS-DE 9 (Rev. 07/23)	Rule 1S-2.0001, F.A.C.

STATEMENT OF CANDIDATE (Section 106.023, F.S.) (Please print or type)	OFFICE USE ONLY
I, <u>Jason Judg</u> candidate for the office of <u>commi</u> have been provided access to read an Chapter 106, Florida Statutes.	
X Signature/of Candidate	<u>8/16/23</u> Date
Each candidate must file a statement with th Appointment of Campaign Treasurer and Desig failure to file this form is a first degree misde Financing Act which may result in a fine of up to Statutes).	nation of Campaign Depository is filed. Willful meanor and a civil violation of the Campaign



TOWN OF MELBOURNE BEACH

BREVARD COUNTY'S OLDEST BEACH COMMUNITY ESTABLISHED 1883

LOYALTY OATH

State of Florida

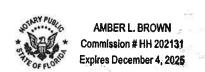
County of Brevard

I, <u>Jason Judy</u>, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the Town of Melbourne Beach and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Signature

Sworn to and subscribed before me by means of $\underline{\checkmark}$ physical presence or __online notarization, this $\underline{\parallel}_{e}$ day of \underline{Avgvef}_{20} 2023, by Jasen Tudal.

(Notary Seal)



Signature of Notary Public

21 Name of Notary

Personally known____OR Produced Identification Type of Identification Produced

<u>аца 16723 риз</u>



Town of Melbourne Beach

Willingness to Serve Statement

Ref: Town Charter Section 2.02

"I am a candidate for the Office of Town Commissioner for a term of three years for the Town of Melbourne Beach, Florida in the Municipal General Election to be held on Tuesday, November 7, 2023."

"I am a qualified elector in the Town of Melbourne Beach, Florida and I have resided in the Town for at least six continuous months immediately prior to the date of qualifying for this office."

"I agree to serve if elected."

Jason Judge Printed Name	Office sought
TOG Flamingo LA Home Address	
Melbourne Beh FL 3295) City, State, Zip	
Email Email	
Occupation	Δ
"Under penalties of perjury, I declare that I have rea	ad the foregoing and that the facts stated in it are
true." Dated this $\int c day of August, 20 23$	Signature of Candidate
STATE OF FLORIDA BREVARD COUNTY	
Signature of Notary Public	physical presence or online notarization, 2023, by Jason Judge Seal AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025
Personally Known & Produced Identification	
Type of Identification F2DL	

Updated 4/11/2023

	AUG 16 '23 PM1:2
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	
	OFFICE USE ONLY
Cand	idate Oath
Name for Ballot: Jason / Eug	rene, Judge,
	/Initial/and/or/Nickname ULast Name Suffix ide for Nickname Affidavit.)
I swear or affirm that I am a candidate for the nonpartisan office of	of commision of Molbour Brack (District #)
(<i>Circuit #</i>), (<i>Group or Seat #</i>)	
have qualified for no other public office in the state, the term of wh	Florida to hold the office to which I desire to be nominated or elected; I nich office or any part thereof runs concurrent with the office I seek; and I gn pursuant to Section 99.012, Florida Statutes; and I will support the of Florida.
	ng Fines, Fees, or Penalties ed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).
If you do, you must also specify the amount owed and each ei	ntity that levied the same on the reverse side.
X (32/) 508 Signature of Candidate (32/) 508 Telephone Number ZOC Flammer Ln Molbovine Address of Legal Residence City	er Brach FL 37951 State ZIP Code
STATE OF FLORIDA	$\int \int Q$
COUNTY OF BOOM	Signature of Notary Public
Sworn to (or affirmed) and subscribed before me by means of	Print, Type, or Stamp Commissioned Name of Notary Public below:
online notarization \Box OR physical presence \Box this \Box day of $\Delta U O U S D$, 2023.	AMBER L. BROWN Commission #1H 202131 Expires December 4, 2025
Personally Known OR Produced Identification	COF FLOT
Type of Identification Produced:	
DS-DE 302NP (Eff/2023)	Rule 1S-2.0001, F.A.C.

Statement of Outstanding Fines, Fees, or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity

Affidavit of	Nickname
My legal name is <u>Jasan Judy</u> contents of this affidavit are true and correct.	. I am over the age of eighteen (18) and the
	I am generally known by this nickname or have used o mislead voters. My nickname does not imply I am some other with a cause or issue, or that is obscene or profane.
STATE OF FLORIDA COUNTY OF Breyoud Sworn to (or affirmed) and subscribed before me by means of	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
online notarization OR physical presence this <u>ho</u> day of <u>AUGUSE</u> , 2023. Personally Known OR Produced Identification Type of Identification Produced: <u>FLDL</u>	AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025
S-DE 302NP (Eff/2023)	Rule 1S-2.0001, F

	AUG 16 '23 P5
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	OFFICE USE ONLY
Candida	ate Oath
(Section 99.021(1)	(a), Florida Statutes)
1, Jason Judel	,
	If your last name consists of two or more names but has no imes). No change can be made after the end of qualifying. allot, the name must be printed above for oath purposes.)
am a candidate for the nonpartisan office of	(Office) (Office) (District #)
(Circuit #) (Group or Seat #); I am a qualified elector of	Brevard County, Florida;
am qualified under the Constitution and the Laws of Florida t	o 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 o	f which office or any part thereof runs concurrent with the office
I seek; and I have resigned from any office from which I am r	equired to resign pursuant to Section 99.012, Florida Statutes;
and I will support the Constitution of the United States and the C	Constitution of the State of Florida.
Candidate's Florida Voter Registration Number (located on yo	our voter information card): _/00 860 767
ballot as may be used by persons with disabilities (see instruction	on the line below as you wish it to be pronounced on the audio ns on page 2 of this form): [Not applicable to write-in candidates.]
X (3(1) 508 Signature of Candidate Telephone Number	5116 Heren ad Alers
206 Flaminger Lu Melboure De Address City	L FL 37951 State ZIP Code
STATE OF FLORIDA	Signature of Notary Public
COUNTY OF Brevard	Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by means of	
	AMBER L. BROWN
online notarization \Box OR physical presence \Box this $\underline{10}$ day of $\underline{Avgv51}$, 2023	AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025
online notarization OR physical presence	* Commission # HH 202131

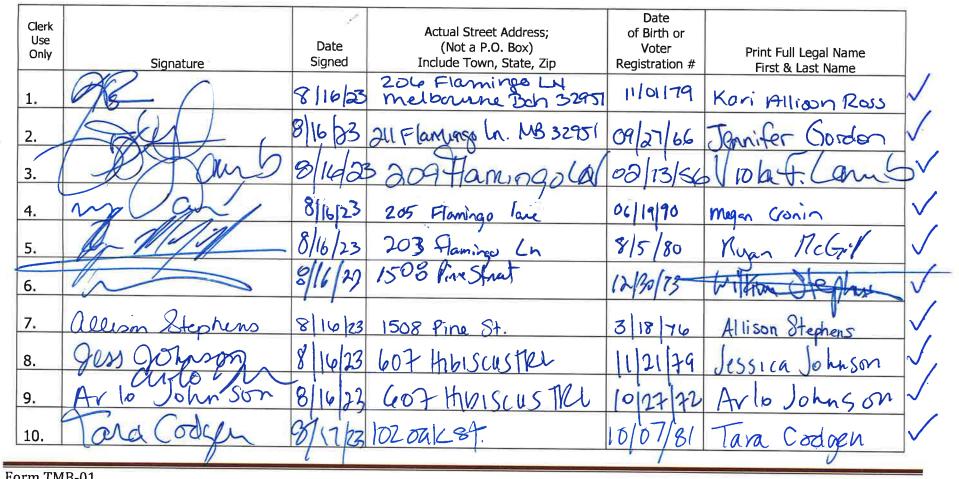
DS-DE 302NP (Rev. 08/2021)



We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name of Jason Judge be placed on the November 7, 2023, Official Municipal Election Ballot for the Office of Mayor for a three (3) year term to expire in November 2026.

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.



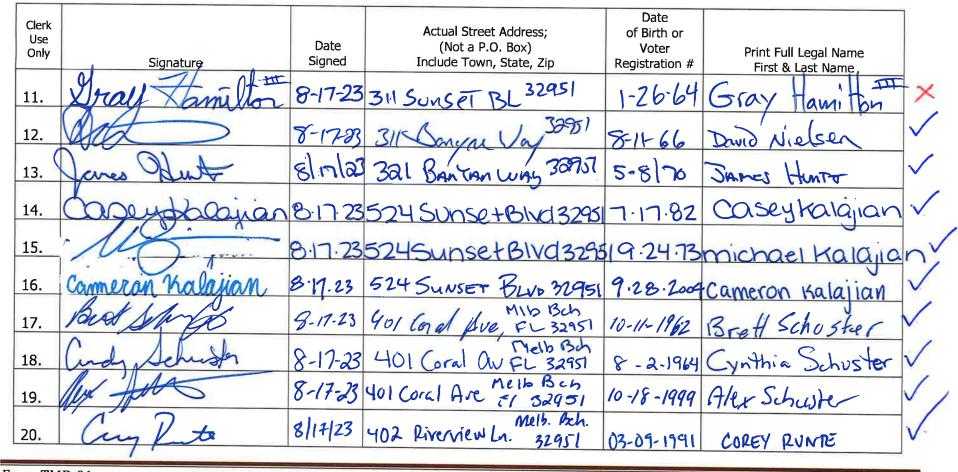


AUG 18 '23 AH10:33

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name of <u>Source</u> be placed on the November 7, 2023, Official Municipal Election Ballot for the Office of Mayor for a three (3) year term to expire in November 2026.

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.



Form TMB-01

65



19

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name of be placed on the November 7, 2023, Official Municipal Election Ballot for the Office of Mayor for a three (3) year term to expire in November 2026.

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name	
21.	Inne D. Batin	8-17-23	322 3rd Ave Melbourne Beh, FL 32001	8-23-56	Joyce D. Barton	
22.	Janita Rinto	08-17-23	402 RIVERVIEW LANE MERBOUNDE BEACH FL 32451	11-09-1990	KRISTA RUNTE	
23.	Mart Prin	8-17-33	417 Liverview Love Melbourne Beach, FL 32951	63-87- 1932	Matt Davis	X
24.	Klhh Bll	8-17-23	216 cHERRYDR MELBONNE BUILF(325	01-16-1986	ASHLEY Brall	
25.	Lowy Ball	8-17-8	210 Cherry Dr. Melbi Bch. FL 32951	5-6-1980	Lowell Ball	
26.	Cultury	8-17-73	514 Arc B, Mel Bch 32951	1-18-1985	Courtney England	
27.	In	8-17-23	SIH AVEB, MelBen 32951	13-5-1981	Jon England	\checkmark
28.		8.17.23		S. 28.82.	Kelly machten	o.V
29.	Theme	8.17.23	204 RIVANSIDEDR. 32951	12.19.74	Scott Mccutler	N.V
30.	MM	4-17-23	509 Hibisaus Tri. mello. Bch FL 3295/	10-14-61	Bryan Foy	\checkmark
form TM	1B-01				Pag	e 3



AUG 18'23 AN10:33

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name of <u>JAION</u> <u>SUPLE</u> be placed on the November 7, 2023, Official Municipal Election Ballot for the Office of Mayor for a three (3) year term to expire in November 2026.

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name
31.	pornia pm	8/17/23	509 HibISUS Trail 3295	4/28/70	Toshia Troy
32.	Ash	8/17/23	514/traiscuis M. Auch	3/11/83	ATEX MITZ JEN MITZ
33.	JumpAll	81723	SI4 HIBISCUS M MAD	9/7/85	JENMITZ
34.					
35.					
36.					
37.					
38.					
39.					-
40.					

Form TMB-01

Page 4

AUG 19 '23 AM10:33

Town Clerk's Certification

Municipality: Melbourne Beach, Florida

4 10

Total Valid: ______

Total Invalid:

I hereby certify that the names of all the petitioners listed as valid appear on the Melbourne Beach, Florida voting list as a qualified ` voter, and that the candidate filed the petition during the qualifying period.

Signature of Town Clerk Amber Brown, Interim Town Clerk

Date 8/18

2 2	\cap	<u> </u>)	AUG 18 '23	
FORM 1	STATE	MENT OF	2022		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAI	INTERESTS	šΓ	FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MIDDLE	E				
MAILING ADDRESS :	- ogen				
706 Haminger LN		(
Ulbourne Black	32551 Brev	and			
town of Melborne	Beach COUNTY:				
Commissions					
NAME OF OFFICE OR POSITION HELI	D OR SOUGHT :				
CANIDIT. CHECK ONLY IF CANDIDATE					
			1		
SCLOSURE PERIOD:	** THIS SECTION <u>MU</u>				
HIS STATEMENT REFLECTS YOU	IR FINANCIAL INTERESTS F	OR CALENDAR YEAR ENI	DING DE	CEMBER 31, 2022.	
IANNER OF CALCULATING R					
ILERS HAVE THE OPTION OF US	ING REPORTING THRESHO	DS THAT ARE ABSOLUTE	DOLLA	R VALUES, WHICH REQUIRES	
EWER CALCULATIONS, OR USIN see instructions for further details).	CHECK THE ONE YOU ARE	USING (must check one)	LY BASE	ED ON PERCENTAGE VALUES	
	RCENTAGE) THRESHOLDS			UE THRESHOLDS	
ART A PRIMARY SOURCES OF INC	OME [Major sources of income to	the reporting person - See inst	ructions		
(If you have nothing to repor	t, write "none" or "n/a")		-		
NAME OF SOURCE OF INCOME		DURCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
J" Screen Printige Enloyd	1 598 Surmoel Are	Satellite Beach PL			
	/	32937		, 8	
PART B SECONDARY SOURCES OF	INCOME				
[Major customers, clients, and (If you have nothing to repo	other sources of income to busine	sses owned by the reporting pe	rson - See	e instructions]	
NAME OF	NAME OF MAJOR SOURCES	ADDRESS		. PRINCIPAL BUSINESS	
BUSINESS ENTITY	OF BUSINESS' INCOME	OF SOURCE		ACTIVITY OF SOURCE	
none					
			_		
ART C REAL PROPERTY [Land, build	lings owned by the reporting perso	on - See instructions!	Verie		
(If you have nothing to report	, write "none" or "n/a")		lines o	e not limited to the space on the n this form. Attach additional , if necessary.	
AUNA			FILING	GINSTRUCTIONS for when	
				here to file this form are d at the bottom of page 2.	
			this fo	UCTIONS on who must file rm and how to fill it out	
FORM 1 Effective lawses 4 2000				on page 3.	

. W A

AUG	19	23	AM1	di setti	:0	
				1	.2	

PART D — INTANGIBLE PERSONAL PROPERTY [St (If you have nothing to report, write "nor	cocks, bonds, certificates of deposit, etc See ins	tructions]		
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
none				
PART E — LIABILITIES [Major debts - See instruction	15]			
(If you have nothing to report, write "non				
NAME OF CREDITOR	ADDRESS OF CREDITOR			
NOML				
PART F — INTERESTS IN SPECIFIED BUSINESSES	IOwnership or positions in certain types of bus	inesses - See instructions]		
(If you have nothing to report, write "none"	or "n/a") BUSINESS ENTITY # 1	BUSINESS ENTITY # 2		
NAME OF BUSINESS ENTITY	W" Soreen Ponty & Embroidery			
ADDRESS OF BUSINESS ENTITY	598 guewood AVE Sot Ben FL			
PRINCIPAL BUSINESS ACTIVITY	score privily			
POSITION HELD WITH ENTITY	owned man-yel			
OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST	100% oww			
PART G — TRAINING For elected municipal officers,	, appointed school superintendents, and commis	ssioners of a community redevelopment		
agency created under Part III, Chapter 163 required to c				
	HAVE COMPLETED THE REQU	JIRED TRAINING.		
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON A SEPARATE SHEE	ET, PLEASE CHECK HERE		
SIGNATURE OF FILE	R: CPA or ATTC	DRNEY SIGNATURE ONLY		
Signature:	If a certified public account	If a certified public accountant licensed under Chapter 473, or attorney		
	in good standing with the she must complete the f	in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:		
	J	prepared the CE		
	Form 1 in accordance w instructions to the form.	Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the		
Date Signed:	disclosure herein is true			
Date Signed.	CPA/Attorney Signature:	CPA/Attorney Signature:		
_ 8/18/25	Date Signed:	Date Signed:		
FILING INSTRUCTIONS:				
If you were mailed the form by the Commission on Et Supervisor of Elections for your annual disclosure t form to that location. To determine what category yo	filing, return the	together with their filing papers. ECESSARY: A candidate who files a Form		

torm 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

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. <u>Do not email your form to the Commission on Ethics, it will be</u> 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), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2022.

CE FORM 1 - Effective: January 1, 2023. Incorporated by reference in Rule 34-8.202(1), F.A.C.

VELEOUR			Receipt:	0000002926	08/18/23	
in the	ALD THE REAL		Cashier:	JKERR		
-0.÷-			Received Of:	JUDGE, JASON 206 FLAMINGO	l E LN	
~~			The sum of:		41.00	
ELECT	J. JUDGE 2023 ELECTIONS					41.0
					Total	41.0
		TENDERED:	Check	0099		41.0

Adam Meyer



Town of Melbourne Beach

Candidate Checklist

AUG 7'23 PM12:19

November 7, 2023 Election	
Candidate qualifying period August 14 – August 18, 2023	
Candidate's Name: Adam Meyer	
Email: adam-z.meyer@gmail.com	
Phone Number: 321 9(20 9997	

Registered voter in the Town of Melbourne Beach

ig lpha Resident for six consecutive months prior to the qualifying date

Numbers one through five may be submitted before the candidate qualifying dates begin. Numbers six through eight need to be filed during candidate qualifying dates.

This column is for the Town Clerk

Execute and file all forms with the Town Clerk

ew

- 1. File DS-DE 9 Appointment of Campaign Treasurer & Designation of Campaign Depository. This **MUST** be filed before opening a campaign account.
- 2. File DS-DE 84 Statement of Candidate within 10 days after filing the DS-DE9
- File Town of Melbourne Beach Loyalty Oath. <u>MUST</u> be filed prior to getting signatures.
 - 4. File TMB-02 Willingness to Serve Statement
 - 5. File DS-DE 302NP Candidate Oath Non-Partisan Office
- 6. Sign Candidate Forms & Information Receipt

7. File TMB-01 Nominating Petitions with 25 Signatures of Melbourne Beach registered voters with a check from the campaign checking account

- Mayor Candidate \$48.00
- Council Candidate \$41.00

8. File Form 1 Statement of Financial Interests

Note: The Town Clerk is not authorized to interpret election law. Please contact the Brevard County Supervisor of Elections at 321-633-2124 if you have any questions.

Updated 4/27/2023

1

\bigcirc	\cap
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	AUG 7 23 PH12:20
(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:	er/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last) Adam Zachary Meyer 4. Telephone (321)960.9997 5. Candidate's Voter Registration #: 115017123 (Not required for Qualifying Purposes)	3. Address (include post office box or street, city, state, zip code) 214 Surf Rd Melbourne Beach, FL 32951
(Not required for Qualifying Purposes) - Phonetic spelling for audio ballot : Prin the audio ballot as may be used by persons with disabilities (see instructions on pag	th name phonetically on the line below as you wish it to be pronounced on ge 2 of this form): A-DUHM MEI-ER
6. Office sought (include district, circuit, group number) Melbourne Beach Commissioner 8. If a candidate for a <u>partisan</u> office, check block and fill in na	7. If a candidate for a <u>nonpartisan</u> office, check if applicable: My intent is to run as a Write-In candidate.
Write-In No Party Affiliation	
	Party candidate. Campaign Treasurer Deputy Treasurer
9. I have appointed the following person to act as my 10. Name of Treasurer or Deputy Treasurer Adam Meyer 12. Mailing Address 214 Surf Rd. 13. City Melkourne	11. Telephone (32) 960 9997 14. State 15. Zip Code
16. I have designated the following bank as my	Bead: FI_ 32951 Primary Depository □ Secondary Depository
17. Name of Bank 18. A	address DGO N Hwy A1A 21. State EI 22. Zip Code 32903
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FO AND DESIGNATION OF CAMPAIGN DEPOSITORY AND	
	Signature of Candidate
25. Treasurer's Acceptance of Appointment (fill in 1, (Please Print or Type Narhe)	n the blanks and check the appropriate block), do hereby accept the appointment
designated above as: X Campaign Treasurer.	Deputy Treasurer.
Date	Signature of Campaign Treasurer or Deputy Treasurer 74

STATEMENT OF CANDIDATE (Section 106.023, F.S.) (Please print or type)	OFFICE USE ONLY
I, <u>Adam Meyer</u> candidate for the office of Melbo	une Reach Commissioner:
have been provided access to read and	d understand the requirements of
Chapter 106, Florida Statutes.	
X Addate Signature of Candidate	<u>8/7/2023</u> Date
Each candidate must file a statement with th Appointment of Campaign Treasurer and Desig Failure to file this form is a first degree misder Financing Act which may result in a fine of up to Statutes).	nation of Campaign Depository is filed. Willful meanor and a civil violation of the Campaign



TOWN OF MELBOURNE BEACH

BREVARD COUNTY'S OLDEST BEACH COMMUNITY ESTABLISHED 1883

LOYALTY OATH

State of Florida

County of Brevard

Adam Meyer, a citizen of the State of Florida and of the United 1,---States of America, and being employed by or an officer of the Town of Melbourne Beach and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Signature

Sworn to and subscribed before me by means of <u>y</u> physical presence or <u>online notarization</u>, 2023, by Alam Zachar this 7_ day of HDOUS N Signature of Notary Public AMBER L. BROWN (Notary Seal) Commission # HH 202131 mour Expires December 4, 2025 Name of Notary Personally known OR Produced Identification Type of Identification Produced FLD

AUG 7 23 PH 12:20



Town of Melbourne Beach

AUG 7'23 PM12:19

Willingness to Serve Statement

Ref: Town Charter Section 2.02

"I am a candidate for the Office of Town Commissioner for a term of <u>4</u> years for the Town of Melbourne Beach, Florida in the Municipal General Election to be held on Tuesday, November 7, 2023."

"I am a qualified elector in the Town of Melbourne Beach, Florida and I have resided in the Town for at least six continuous months immediately prior to the date of qualifying for this office."

"I agree to serve if elected."

Adam Meyer Printed Name 214 Surf Rd	Melbourne Beach Commission Office sought
Home Address	
Melborne Beach, 7L 3295, City, State, Zip	
adam.z.meyer@gmail.co	m
Program Manager Occupation	
"Under penalties of perjury, I declare that I have retrue." Dated this 7^{++} day of <u>August</u> , 20 <u>23</u>	ead the foregoing and that the facts stated in it are Signature of Candidate
STATE OF FLORIDA BREVARD COUNTY	
Sworn to and subscribed before me by means of	Seal AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025
Personally Known or Produced Identification	COFFLOC CANNES DECEMINEL 4, 2020
Type of Identification FLDL	

Updated 4/11/2023

\cap	
CANDIDATE OATH NONPARTISAN OFFICE (Do not use this form if a Judicial or School Board Candidate)	AUG 7'23 PM 12:19
Check box only if you are seeking to qualify as a write-in candidate:	OFFICE USE ONLY
Cand	idate Oath
Name for Ballot: Adam 1200	hary, Meyer,
	e/Initial/and/ør/Nickname Cast Name Suffix ide for Nickname Affidavit.)
I swear or affirm that I am a candidate for the nonpartisan office of	(Office) (District #)
have resigned from any office from which I am required to resig Constitution of the United States and the Constitution of the State	ng Fines, Fees, or Penalties
	ed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).
YES, I Do	NO, I Do Not $\underline{\times}$
If you do, you must also specify the amount owed and each e	ntity that levied the same on the reverse side.
X (32) 960 Signature of Candidate Telephone Numb 214 Suff Rd Melbourne B Address of Legal Residence City STATE OF FLORIDA COUNTY OF Brevard Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence this this 7_day of August, 2023. Personally Known OR Produced Identification	
Type of Identification Produced: FLDL	
DS-DE 302NP (Eff/2023)	Rule 1S-2.0001, F.A.C. 78

Statement of Outstanding Fines, Fees, or Penalties

ARG 7 723 pt 12:19

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity

Affidavit of	Nickname
My legal name is	I am over the age of eighteen (18) and the
My nickname is it as part of my legal name. I have not created the nickname to person, constitute a political slogan or otherwise associate me Signature:	I am generally known by this nickname or have used o mislead voters. My nickname does not imply I am some other with a cause or issue, or that is obscene or profane.
STATE OF FLORIDA COUNTY OF Brevland Sworn to (or affirmed) and subscribed before me by means of	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
online notarization OR physical presence this day of August 2023 Personally Known OR Produced Identification	AMBER L. BROWN Commission # HH 202131 Expires December 4, 2025
Type of Identification Produced: <u>++++++++++++++++++++++++++++++++++++</u>	

	22
CANDIDATE OATH	
NONPARTISAN OFFICE	
(Do not use this form if a Judicial or School Board Candidate)	AUG 7 '23 pa 12:
Check box only if you are seeking to qualify as a write-in candidate:	
Write-in candidate	OFFICE USE ONLY
Candid	ate Oath
(Section 99.021(1)(a), Florida Statutes)
I, Adam Me	yer,
hyphen, check box [] (see page 2 - Compound Last N Although a write-in candidate's name is not printed on the b	If your last name consists of two or more names but has no ames). No change can be made after the end of qualifying. pallot, the name must be printed above for oath purposes.)
am a candidate for the nonpartisan office of Melbow	me Beach Commissioner,
(<i>Circuit #</i>), (<i>Group or Seat #</i>); I am a qualified elector of	Brevard 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	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 y	115/17/2
	your voter information card):
	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.]
ballot as may be used by persons with disabilities (see instruction	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 adam. z. meyer@gmail.com
ballot as may be used by persons with disabilities (see instruction <u>A - DUHM MET-F</u> (321) 960 Signature of Candidate Telephone Number	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 adam. z. Meyer@gmail.com Email Address
ballot as may be used by persons with disabilities (see instruction A - DUHM MET-F X (321) 960	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 adam. z. Meyer@gmail.com Email Address
ballot as may be used by persons with disabilities (see instruction <u>A-DUHM MEI-F</u> (321)960 Signature of Candidate Telephone Number 214 Surf Rd Melbourne Be	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 adam. z. Meyer@gmail.com Email Address ach FL 32951
ballot as may be used by persons with disabilities (see instruction <u>A-DUHM MEI-F</u> (321)960 Signature of Candidate Telephone Number 214 Surf Rd Melbourne Be	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 Adam. Z. Meyer@gmail.com Email Address Ach FL State ZIP Code
ballot as may be used by persons with disabilities (see instruction <u>A - DUHM MEI-F</u> (321) 960 Signature of Candidate Telephone Number 214 Surf Rd Melbourne Be Address City	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 adam. z. Meyer@gmail.com Email Address ach FL 32951
ballot as may be used by persons with disabilities (see instruction <u>A - DUHM MET-F</u> (321) 960 Signature of Candidate Telephone Number 214 Surf Rd Melbourne Be Address City STATE OF FLORIDA COUNTY OF Brevland Sworn to (or affirmed) and subscribed before me by means of	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] R 9997 Adam Z. Mayer@gmail.con Email Address Address Address All State State State ZIP Code Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: AMBER L. BROWN
ballot as may be used by persons with disabilities (see instruction <u>A - DUHM MEI-F</u> (321) 960 Signature of Candidate Telephone Number 214 SUF Rd Melbourne Be Address City STATE OF FLORIDA COUNTY OF <u>Brevlow</u> Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 Adam. Z. Meyer@gmail.con Email Address Address Address Address Address Address Address Address State State State ZIP Code Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
ballot as may be used by persons with disabilities (see instruction <u>A - DUHM MET-F</u> X (321) 960 Signature of Candidate Telephone Number 214 SUFF Rd Melbourne Be Address City STATE OF FLORIDA COUNTY OF <u>Brevloand</u> Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence A	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.] ER 9997 adam. Z. Meyer@gn.ad.con Email Address ach FL 32951 State 32951 State ZIP Code Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: AMBER L. BROWN Commission # HH 202131

DS-DE 302NP (Rev. 08/2021)



TOWN OF MELBOURNE BEACH, FLORIDA CANDIDATE NOMINATION PETITION

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name Adam Meyer be placed on the November 7, 2023, Official Municipal Election Ballot for

_ Office of the Mayor for a three (3) year term to expire November 2026

X Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name	
1.	Verly Sala	8/10/23	215 Surf Road Melbourne Beach, FL 32951	08/03/1986	Nicholas Szczepanski	X
2.	Kundenley Waters	8/1/23	215 Surf Road Melbourne Beach, FL 32951	5)15/71	Kimberley Waters	X
3.	CZZ	8/10/23	217 Surf Road Melbourne Beach, FL 32951	127640281	Linda Swensen	
4	1.E	8/10/23	217 Surf Road Melbourne Beach, FL 32951	127640287	Thomas Swensen	\
5.	Aundubeal	8/10/23	219 Surf Road Melbourne Beach, FL 32951	124964838	Jennifer Deal	 ~
6.	Rotal	8/10/23	219 Surf Road Melbourne Beach, FL 32951	124967339	Robert Deal	 √
7.				128336965	Rachel Deal	
8.	Hall	8/10/23	221 Surf Road Melbourne Beach, FL 32951	126675223	Gabor Kishegyi	 ~
9.	Low Koley	8/10/23	221 Surf Road Melbourne Beach, FL 32951	126675294	Lisa Kishegyi	1
10.	hung	8-10-23	214 Surf Road Melbourne Beach, FL 32951	114392315	Kimberly Adkinson-Cowles	~

81



TOWN OF MELBOURNE BEACH, FLORIDA **CANDIDATE NOMINATION PETITION**

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name Adam Meyer be placed on the November 7, 2023, Official Municipal Election Ballot for

Office of the Mayor for a three (3) year term to expire November 2026

X Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) Legibly print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) NOT sign another person's name; (8) NOT sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Date Clerk Actual Street Address; of Birth or Use Date (Not a P.O. Box) Voter Print Full Legal Name Only Signed Include Town, State, Zip Registration # Signature First & Last Name 7-29-45 8-11-23 435 RIVERVIEW LANE. XOPI JOADDE SOILEY HANSENV 11. MELBOURNE BEACH FLATS 435 RIVERVIEW LANE 8-11-23 MELBOURNE BEACH FL 3295 DANIEL H. HANSEN -4-43 12. 440 Riverview Ln. 8-11-23 Melbourne Beach, FL32951 101048824 Charles W. Twidd 13. 440 Rivensien Lane 8-4-23 101047789 Angele Twildy 14. Melbourne Brech. FL32251 E. 2103 8-11-23 1-17-1957 15. 2103 Neotune Drive 8-11-23 16. 7-5-1955 MARIAV. KRAJIC Bd FL 32951 ROAD SURF Kivest 6 Ker he 8-11-23 BRENT G BHUNATTU 17. 08-18-19% Ue 2622 DAAD 723 SUPE 8-11-23 32951 18. ebolatt MCASERSONV 10-20-191 Nel Beach 300 Rd 3 8-11-22 19. 3295 8-11-23 300 60

82 Page 2

AUG 14 72 px3:02



TOWN OF MELBOURNE BEACH, FLORIDA CANDIDATE NOMINATION PETITION

We, the undersigned qualified electors of the Town of Melbourne Beach, Florida, hereby request that the name <u>Adam Meyer</u> be placed on the November 7, 2023, Official Municipal Election Ballot for

___Office of the Mayor for a three (3) year term to expire November 2026

 \overline{X} Office of Commission for a two (2) year term to expire November 2025

We further certify that we have not signed the petition of any other candidate for this particular office for this election.

Instructions for Signers: The person(s) signing this petition must: (1) be a Melbourne Beach, Florida resident and registered voter; (2) sign legal name as it appears on the Melbourne Beach voting list (no nicknames allowed); (2) print date of signing; (3) print actual street address (no P.O. Boxes allowed); (4) print date of birth or voter registration number listed on voter card; (5) **Legibly** print legal name as it appears on the Melbourne Beach voting list; (6) sign only once on this petition; (7) **NOT** sign another person's name; (8) **NOT** sign for another candidate running for the same office. Signers understand that the Town Clerk cannot certify the name of a voter that cannot be read due to illegible writing.

Clerk Use Only	Signature	Date Signed	Actual Street Address; (Not a P.O. Box) Include Town, State, Zip	Date of Birth or Voter Registration #	Print Full Legal Name First & Last Name	
21.	Kathin Junealy	8-11-23	304 Surf Rd melby	12/28/00	Kathryn Wers.	osthi
22.	Jace & allos	8-11-23	1710 Pine St. Melter	5/8/54	Todd Shortnidge All	bent V
23.	Dank vel Bar La	8-11-23		10/2/71	Dawn Micheller	Barla
24.	Elinabeth Moury ou	8.11.23	303 Surf Rol Melb. Bch FL	4/21/75	Elizabeth Moun	tioy
25.	any theen	8-11-23	HIS EVERVIEW IN MEL BRACH FL	07/28/83	Amy Fulles	\checkmark
26.	mil fun	8/11/23	Mel Beach FL.	02/08/83	Michael Fuller	\checkmark
27.	anny purch	\$ 13 23	206 SURFRO MAL BROCHEC	10/02/08	ANTHOWY PRESE	\checkmark
28.	Mapp	8/14/23	213 Sunf Rd. Melbourne Beach FL 32951	112707688	Melinda Cobb	\checkmark
29.	ming lalt		213 Surf Rd. Melbourne Beach, FL 32951	113357739	Michael Cobb	\checkmark
30.	а С					

Form TMB-01

Page 3 83

Town Clerk's Certification

Municipality: Melbourne Beach, Florida

Total Valid: ______

Total Invalid:

I hereby certify that the names of all the petitioners listed as valid appear on the Melbourne Beach, Florida voting list as a qualified voter, and that the candidate filed the petition during the qualifying period.

Signature of Town Clerk

Amber Brown, Interim Town Clerk

Date 🤗

	\cap	ſ)		PM2+204
FORM 1	STATEN	1ENT OF		2022	
Please print or type your name, mailing address, agency name, and position below	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:	1
LAST NAME FIRST NAME MIDE Meyer Adam	2 1				
MAILING ADDRESS: 214 SURF Rd	zuciu j				
ATT SOF KU					
Melbourne Bear	ZIP: COUNTY:	vard			
NAME OF AGENCY :					
NAME OF OFFICE OR POSITION H	ELD OR SOUGHT :				
Melbourne Bea					
		RAPPOINTEE			
DISCLOSURE PERIOD:	**** THIS SECTION MU	ST BE COMPLETED) ****		
THIS STATEMENT REFLECTS Y	OUR FINANCIAL INTERESTS F	OR CALENDAR YEAR END	ING DE	CEMBER 31, 2022.	
MANNER OF CALCULATING					
FILERS HAVE THE OPTION OF FEWER CALCULATIONS, OR US	SING COMPARATIVE THRESHO	LDS, WHICH ARE USUALL			
(see instructions for further details	S). CHECK THE ONE YOU ARE PERCENTAGE) THRESHOLDS			JE THRESHOLDS	
PART A PRIMARY SOURCES OF	NCOME [Major sources of income to				
(If you have nothing to re NAME OF SOURCE	port, write "none" or "n/a")	URCE'S		SCRIPTION OF THE SOURCE'S	
OF INCOME	AD	DRESS	P	RINCIPAL BUSINESS ACTIVITY	1
NVS, Inc.	200 S. Park Rd, #3		Ena	gl Estatte - Rental Mu	-
Conrad Realty Coro	429 / hrush Di	429 Thrush Dr. Salellike Bd, FL Kegl			genn
					1
	OF INCOME and other sources of income to busine eport, write "none" or "n/a")	sses owned by the reporting per	rson - See	instructions]]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME				
N/A	N/A	N/A		N/A	
	-	•			-
PART C REAL PROPERTY [Land,]	buildings owned by the reporting perso port, write "none" or "n/a")	n - See instructions]		e not limited to the space on the	
416 Rutgers Ave.	Melbourne, FL	32951		n this form. Attach additional , if necessary.	
Ocean Walkway, Melbourne Reach, FL 32951 and wh				G INSTRUCTIONS for when here to file this form are d at the bottom of page 2.	
l.			this fo	UCTIONS on who must file orm and how to fill it out on page 3.	85

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				
Savings Account Space					
	A) [
401 K Retirement 1	JUS, Inc.				
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
United Wholesale Mortgage 585 S.	Olva E. Bontiac, MI 48341				
Right Path Servicing BOO Stat					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or po (If you have nothing to report, write "none" or "n/a") BUS NAME OF BUSINESS ENTITY	INESS ENTITY # 1 BUSINESS ENTITY # 2				
ADDRESS OF BUSINESS ENTITY	V/A				
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST					
agency created under Part III, Chapter 163 required to complete annual e	PART G — TRAINING For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 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:	CPA or ATTORNEY SIGNATURE ONLY				
Signature:	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.				
8/14/2023	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	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.				
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	and specified state employee must file within 30 days of the				

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), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

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, 2022.

86

CE FORM 1 - Effective: January 1, 2023. Incorporated by reference in Rule 34-8.202(1), F.A.C.

T WEL	BOUR		Receipt:	0000002910	08/14/23	
Contraction of the second			Cashier:	JKERR		
			Received Of:	ADAM MEYER 214 SURF RD		
			The sum of:		41.00	
ELECT	2023 CANDIDATE					41.00
					Total	41.00
		TENDERED:	Check	1001		41.00