### **OFFICE USE ONLY** STATE OF FLORIDA **APPOINTMENT OF CAMPAIGN TREASURER** AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES** RECEIVED (Section 106.021(1), F.S.) MAY 1 3 2010 (PLEASE TYPE) CHECK APPROPRIATE BOX: **Original Appointment Deputy Treasurer** Reappointment of Treasurer Name of Candidate 1. Address (include post office box or street, city, state, zip code) Patrick Phipps 3. Office (add district, circuit, group number) Telephone (optional) 2. Party (Partisan candidates only) (954) 2149294 JULISIUM I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 4. Name of Treasurer or Deputy Treasurer 5. Mailing Address (If post office box or drawer add street address) 6. Telephone 9. State 8. County Broward I have designated the following named bank as my **Primary Depository** Secondary Depository 11. Name of Bar 12. Street Address 13. Citv 14. County 15. State 16. Zip Code Slowar Date Campaign Treasurer's Acceptance of Appointment do hereby accept the appointment as (Please Print or Type) Campaign Treasurer Deputy Treasurer for the campaign of who is seeking nomination or election as a candidate to the office of (Party) UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FAC S STATED ARE TRUE. X

ampaign Treasurer or Deputy Treasurer

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER	OFFICE USE ONLY
AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	RECEIVED MAY 4 2010
(PLEASE TYPE)	BY: Messe
CHECK APPROPRIATE BOX:	d. 30 pm
	ty Treasurer Reappointment of Treasurer
Patrick Phipps	1. Address (include post office box or street, city, state, zip code)  233 SW 5 <sup>th</sup> St.  Dania Beach, FL 33004
Telephone (optional) 2. Party (Partisan candidates only (954) 214 9299	3. Office (add district, circuit, group number)  CHY COMMISSION
	paign Treasurer Deputy Treasurer
4. Name of Treasurer or Deputy Treasurer	
5. Mailing Address (If post office box or drawer add street addres 2860 Marina Mile, #109	6. Telephone 954 599 6328
7. City  Bania Beach  Broward	9. State 10. Zip Code 3 3 3 1 2
I have designated the following named bank as my	ary Depository Secondary Depository
11. Name of Bank Valley Bank	12. Street Address 3309 Sheridan St.
Hollywood Broward	15. State 16. Zip Code 33 021
17. Signature of Candidate	Date 4 30/10
Campaign Treasurer's A	cceptance of Appointment
1. Lisa Duke	, do hereby accept the appointment as
(Please Print or Type)  Campaign Treasurer Deputy Treasurer for the	campaign of Patrick Phipps,
who is seeking nomination or election as a	candidate to the office of
City Commission	(Party)
	IAVE READ THE FOREGOING CAMPAIGN TREASURER'S THAT THE PACTS STATED ARE TRUE.
M30/10 X	Subuk
Date	Signature of Campaign Treasurer or Deputy Treasurer

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.) (Please Type) **OFFICE USE ONLY** 

RECEIVED

MAY 1 3 2010

PRESENTED

MAY 1 3 2010

PRESENTED

MAY 1 3 2010

candidate for the office of Dania Beach City Counission;
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

Signature of Candidate

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

## **LOYALTY OATH**

(Sections 876.05-876.10, Florida Statutes)

## **NONPARTISAN OFFICE**

OFFICE USE ONLY

					- 1
I,	DARLOL	W.	ي ترو	005	
	First Name	Middle Name/Initia	al	Last Name	
a c	itizen of the State of Florida and eby solemnly swear or affirm that	of the United States of A	America, and be	ing [a candidate for public office] de States and of the State of Florida.	,
filed	I with the records of the governing of the government	official or employing govern	mental agency pri	5, Florida Statutes, and that oath shall bor to the approval of payment of salary	,
		OATH OF CAN (Section 99.021, Florid			
I,	DR. PATRICK	299148			
	(PLEASE PRINT NAME AS TOO WISH IT IT	O APPEAR ON THE BALLOT * N	IAME MAY NOT BE C	IANGED AFTER THE END OF QUALIFYING)	1
am	a candidate for the nonpartisan o	ffice of Commission	2 <u>~</u>		
			(office)	(district #)	
-	(circuit #) (group or seat #)	; I am a qualified elector o	1 BROWA	County, Florid	a;
offic Flo	ce I seek; and I have resigned fr	the state, the term of whom any office from which	ich office or any n I am required t	part thereof runs concurrent with the oresign pursuant to Section 99.012	<b>,</b>
	Signature of Candidate		9299	DANIA BEECH@ g Mail	- cc
	Signature of Candidate	Telephone Number		DANIA BEECH @ G MA! Email Address	- cc
	Signature of Candidate	Telephone Number	F(		- 00
		Telephone Number		Email Address	- cc
* PI	Signature of Candidate	Telephone Number  ANIA BE DOCK  City  ne line below as you wish	F ( State	Email Address	<b>-</b> cc
* PI	Signature of Candidate  SIS-W- 2- ST. SAddress  ease print name phonetically on the	Telephone Number  ALLA BE DCLL  City  ne line below as you wish age 2 of this form):	F ( State	Email Address  33004  ZIP Code  sed on the audio ballot for persons	- cc
* Pl	Signature of Candidate  SISALUS (25 ST. )  Address  ease print name phonetically on the disabilities (see instructions on property of the control of the con	Telephone Number  ALLA BE DCLL  City  ne line below as you wish age 2 of this form):	State it to be pronounce	Email Address  33004  ZIP Code  sed on the audio ballot for persons	cc
* Pl	Signature of Candidate  SIS-W- 12- 5- 5- 7  Address  ease print name phonetically on the disabilities (see instructions on particular of the control of the	Telephone Number  ALLA BE DCLL  City  ne line below as you wish age 2 of this form):	State it to be pronounce	Email Address  33004  ZIP Code  sed on the audio ballot for persons	- cc
* Pl	Signature of Candidate  SISALUS (25 ST. )  Address  ease print name phonetically on the disabilities (see instructions on property of the control of the con	Telephone Number  ANIA BEDCH  City  ne line below as you wish age 2 of this form):  PA — TRIK	State it to be pronounce	Email Address  33004 ZIP Code  red on the audio ballot for persons	- cc
* Pli with	Signature of Candidate  Signat	Telephone Number  ANIA BEDCH  City  ne line below as you wish age 2 of this form):  PA — TRIK	state  it to be pronounce  FIP:  day of JA	Email Address  33004 ZIP Code  sed on the audio ballot for persons  NUARY, 20//.	- cc
* Pli with	Signature of Candidate  Signat	Telephone Number  ANIA BEDCH  City  ne line below as you wish age 2 of this form):  PA — TRIK	state  it to be pronounce  FIP:  day of JA  Signature of	Email Address  33004 ZIP Code  red on the audio ballot for persons	
* Pli with	Signature of Candidate  Signat	Telephone Number  ANIA BEDCH  City  ne line below as you wish age 2 of this form):  PA — TRIK	state  it to be pronounce  FIP:  day of JA  Signature of	Email Address  33004 ZIP Code  sed on the audio ballot for persons  WUARY, 20//.  Motary Public	

DS-DE 25 (Rev. 10/10)

Rule 1S-2.0001, F.A.C.



## NOTICE OF CANDIDACY FOR CITY COMMISSIONER

I, PATRICL PURIOS, residing at 31500 12TH ST. DAMABEARY FI 33000
Dania Beach, Broward County, Florida, do hereby give notice of my candidacy for the office of
city commissioner of the City of Dania Beach, Florida, in the forthcoming general election to be
held in said city on March 8, 2011.
I do fruther state that I am a hora fide siting after II rited Character of America and a siting of
I do further state that I am a bona fide citizen of the United States of America, and a resident of the City of Dania Beach; that I have resided in the City of Dania Beach for six (6) months
immediately preceding the date of the election to be held; that I am over the age of twenty-one
(21) years; that I have paid the qualifying fee for said office, and that I have fully satisfied all
conditions precedent to such candidacy, pursuant to the provisions of the charter of said city.
providence of such distributions, pursuants to the providence of the charter of such city.
Signature of candidate
State of Florida
County of Broward
•
Before me, the undersigned authority, this day personally appeared PATRICK PHIPPS
who, upon being duly sworn, deposed and said: That he/she is the candidate referred to in the
foregoing notice; that he/she is familiar with the contents of said notice, and the facts and matters
therein stated are true; and that he/she did sign said notice for the purpose therein specified.
Personally Known or Produced Identification
reisonary known or Froduced Identification
Type of Identification Produced
S
Sworn to and subscribed before me this day of January, 2011.
Junio Olise of Solling Orus Still Son
Notary Public
* State of Florida

FORM 1	STATEN	MENT OF	2010
Please print or type your name, mailing address, agency name, and position be		L INTERESTS	
LAST NAME - FIRST NAME - MIDI	ATACK	FOR OF USE ON	
MAILING ADDRESS: 315012	Street		
			ID Code
Dania Beach	ZIP: COUNTY: 33004 DYC	oward	ID No.
NAME OF AGENCY:  DANIA BEA	cft		Conf. Code
NAME OF OFFICE OR POSITION H	•		P. Req. Code
You are not limited to the space on the	lines on this form. Attach additional sheet	· ·	
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR A	APPOINTEE	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE DECEMBER 31, 201	FINANCIAL INTERESTS FOR THE PR LOW WHETHER THIS STATEMENT IS	TION MUST BE COMPLETED** RECEDING TAX YEAR, WHETHE S FOR THE PRECEDING TAX YE TAX YEAR IF OTHER THAN TH	ER BASED ON A CALENDAR YEAR OR ON EAR ENDING EITHER (must check one): E CALENDAR YEAR:
instructions for further details). PLEAS  COMPARATIVE (PERCENTAGE)	RS THE OPTION OF USING REPORE  BY OR USING COMPARATIVE THRES  BE STATE BELOW WHETHER THIS ST  BE) THRESHOLDS  OR	HOLDS, WHICH ARE USUALLY TATEMENT REFLECTS EITHER ( DOLLAR VA	E ABSOLUTE DOLLAR VALUES, WHICH BASED ON PERCENTAGE VALUES (see must check one): LUE THRESHOLDS
PART A PRIMARY SOURCES OF (If you have nothing to re	INCOME [Major sources of income to toport, you must write "none" or "n/a"	the reporting person]	
NAME OF SOURCE OF INCOME		JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Cuarles Russinera	Bester FOOT LANGER	note Fla	DEAL ESTOTE SALES
PART B SECONDARY SOURCES (If you have nothing to re	OF INCOME [Major customers, clients eport, you must write "none" or "n/a	, and other sources of income to	businesses owned by the reporting person]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
12/A	WIA	NA	NA
DART C DEAL PROPERTY (Lond	huilding and huit		
(If you have nothing to re	buildings owned by the reporting perso port, you must write "none" or "n/a"		FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.
315W125 DONO	1.0		INSTRUCTIONS on who must file this form and how to fill it out
30 5W 13 5- DE	どら		begin on page 3.  OTHER FORMS you may need
			to file are described on page 6.

PART D — INTANGIBLE PERSON/ (If you have nothing to	AL PROPERTY [Stocks, bonds, report, you must write "none	certificates of deposit, etc.] " or "n/a")	
TYPE OF INTANGIBL	.E	BUSINESS ENTITY TO WHICH	THE PROPERTY RELATES
	7	JA	
PART E — LIABILITIES [Major deb (If you have nothing to	ots] report, you must write "none	" or "n/a")	<del></del>
NAME OF CREDITO	OR	ADDRESS OF	CREDITOR
·		NA	
			•
PART F — INTERESTS IN SPECIFIE	D BUSINESSES [Ownership of eport, you must write "none" of	or positions in certain types of businesses]	
(ii you nave nouning to h	BUSINESS ENTITY #		BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
ADDRESS OF BUSINESS ENTITY	NIA		NA
PRINCIPAL BUSINESS ACTIVITY	101	~(~	
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			
IF ANY OF PARTS A 1	THROUGH F ARE CONT	INUED ON A SEPARATE SHEET,	PLEASE CHECK HERE
SIGNATURE (required):			IED (required):
D. O. o	- let		1-3-2011
	FILING	INSTRUCTIONS	

#### WHAT TO FILE:

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

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

Facsimiles will not be accepted.

#### NOTE:

#### **MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

#### IDITIO III DITIO

#### WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

**Candidates** file this form together with their qualifying papers.

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

#### WHEN TO FILE:

*Initially*, each local officer/employee, state officer, and specified state employee must file *within 30 days* of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

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

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

## NOTICE OF LOGIC AND ACCURACY TEST

F.S. 101.5612 Testing of Tabulating Equipment

Notice is hereby given that the pre-election Logic and Accuracy test for the automatic tabulating equipment for the February 8, 2011 Municipal Primary Election will take place at 10:00 a.m., Wednesday, February 2, 2011\* at the site listed below. Attendance at this test of the equipment is strictly optional and you are welcome to observe.

SUPERVISOR OF ELECTIONS VOTING EQUIPMENT CENTER 1501 NW 40 AVENUE LAUDERHILL, FL (954) 712-1903

\* Tentative date/time assuming that Early Voting is not offered.

## ACKNOWLEDGEMENT OF RECEIPT

I, De Parzick Phips, Candidate for Dania Beach City Commission, acknowledge receipt of the Notice of Logic and Accuracy
Commission, acknowledge receipt of the Notice of Logic and Accuracy
Test for the February 8, 2011 Municipal Primary Election, pursuant to
F.S. 101.5612.
Signature of Candidate:
Date: Jan 3, 2011
Municipal Clerk: Strung Stal son

## NOTICE OF LOGIC AND ACCURACY TEST

F.S. 101.5612 Testing of Tabulating Equipment

Notice is hereby given that the pre-election Logic and Accuracy test for the automatic tabulating equipment for the March 8, 2011 Municipal Special Election will take place at 10:00 a.m., Wednesday, March 2, 2011\* at the site listed below. Attendance at this test of the equipment is strictly optional and you are welcome to observe.

SUPERVISOR OF ELECTIONS VOTING EQUIPMENT CENTER 1501 NW 40 AVENUE LAUDERHILL, FL (954) 712-1903

\* Tentative date/time assuming that Early Voting is not offered.

## **ACKNOWLEDGEMENT OF RECEIPT**

I, De - De Commission, acknowledge receipt of the Notice of Logic and Accuracy
Test for the March 8, 2011 Municipal Special Election, pursuant to F.S. 101.5612.
Signature of Candidate: De Rouse
Date:
Municipal Clerk: Army Stelson

## 106.1435 Usage and removal of political campaign advertisements.--

- (1) Each candidate, whether for a federal, state, county, or district office, shall make a good faith effort to remove all of his or her political campaign advertisements within 30 days after:
- (a) Withdrawal of his or her candidacy;
- (b) Having been eliminated as a candidate; or
- (c) Being elected to office.

However, a candidate is not expected to remove those political campaign advertisements which are in the form of signs used by an outdoor advertising business as provided in chapter 479. The provisions herein do not apply to political campaign advertisements placed on motor vehicles or to campaign messages designed to be worn by persons.

- (2) If political campaign advertisements are not removed within the specified period, the political subdivision or governmental entity has the authority to remove such advertisements and may charge the candidate the actual cost for such removal. Funds collected for removing such advertisements shall be deposited to the general revenue of the political subdivision.
- (3) Pursuant to chapter 479, no political campaign advertisements shall be erected, posted, painted, tacked, nailed, or otherwise displayed, placed, or located on or above any state or county road right-of-way.
- (4) The officer before whom a candidate qualifies for office shall notify the candidate, in writing, of the provisions in this section.
- (5) This provision does not preclude municipalities from imposing additional or more stringent requirements on the usage and removal of political campaign advertisements.

History.--s. 1, ch. 84-221; s. 20, ch. 84-302; s. 14, ch. 87-224; s. 647, ch. 95-147.

Date Received: 1/3/201
Date Received: 1/3/2011
Qualifying Officer's Name: Louise Stilson, CMC, City Clerk
Qualifying Officer's Signature: Army Stalson
Date: /-3-//

## Broward County Statement of Ethical Campaign Practices

The Broward County Ethical Campaign Practices Act shall apply to any candidate for elected public office whose constituency resides, in whole or in part, within Broward County, or when the boundaries of the public office sought are located, in whole or in part, within the County. "Candidate" means any person to whom any one or more of the following applies:

- (1) Any person who seeks to qualify for nomination or election by means of the petitioning process;
- (2) Any person who seeks to qualify for election as a write-in candidate;
- (3) Any person who receives contributions or makes expenditures, with a view to bringing about his or her nomination or election to, or retention in, public office;
- (4) Any person who appoints a treasurer and designates a primary depository; or
- (5) Any person who files qualification papers and subscribes to a candidate's oath as required by law.

A candidate's decision regarding whether to execute the statement is strictly voluntary. A candidate executing the Statement of Ethical Campaign Practices shall file the original and a copy of the executed statement, bearing the candidate's signature, with the officer before whom the candidate qualifies within five (5) days after becoming a candidate for the elected public office.

As a candidate for public office in Broward County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore:

- 1. I shall not make my race, color, religion, gender, national origin, physical disability, or sexual orientation an issue in my campaign.
- 2. I shall not make my opponent's race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation an issue in my campaign.
- 3. I will condemn any appeal to prejudice based on race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation.
- 4. I shall not attack or question my opponent's patriotism.
- 5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement nor shall I tolerate or permit members of my campaign organization to engage in such activities.
- 6. I shall not tolerate nor permit members of my campaign organization to engage in activities designed to destroy or remove campaign materials or signs lawfully displayed on public or private property.
- 7. I shall not tolerate my supporters engaging in these activities which I condemn nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group which resorts to the methods and tactics that I hereby condemn.
- 8. I shall run a positive campaign emphasizing my qualifications for office and my positions on issues of public concerns and I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
- 9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting an opponent's credibility.
- 10. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts

The state of person and door of the state of	nee, distorte, or misroprocente taste.
Executed on this day 3 of Since any with Esses:	BY CANDIDATE: Signature
	De PATOLICE W. PATTYS
	(Print Name)
STATE OF FLORIDA )	
) SS.	
COUNTY OF BROWARD	
The foregoing instrument was acknowledged before me this	3 day of JANUARY,
2011 PATRICK PHIPPS	who is personally known to me or who has produced
AN OF STUDY	n and who did/did not take an oath.
- inclour	TANUARY 201.
ENGLARY SEAL * POULLE ST. DIAN	LAUSE STUSAN
#DD 941620 (Signature of person taking acknowledgment)	•
An Conded William College Coll	typed, printed, or stamped
My <b>commission as the</b> s:	

	1/3/2011		
REC	EIVED FROM:	REMIT PAYMENT TO	 O:
Campai	gn Account of	City of Dania Beach	
Patrick	Phipps	City Clerk's Office	
31 SW 1	2th Street	100 W. Dania Beach Boule	vard
Dania B	each, FL 33004	Dania Beach, FL 33004	
CODE			
	001-0000-115.07.00		
	Election Assessmer	nt Fee	\$203.8
	March 8, 2011 Elec	tion	
	Check #1032		
	Paid 1/3/2011		
<u> </u>			
-			
	TOTAL		\$203.8
CLER	K Louise	Cuit	

1/3/2011		
CEIVED FROM:	REMIT PAYMENT TO	 D:
ign Account of	City of Dania Beach	
Phipps	City Clerk's Office	
12th Street	100 W. Dania Beach Boulevard	
Beach, FL 33004	Dania Beach, FL 33004	
		\$25.00
March 8, 2011 Elec	etion	
Check #1034		
Paid 1/3/2011		
ТОТАІ		Ø35.00
	Ctilan	\$25.00
	CEIVED FROM: ign Account of Phipps 12th Street Beach, FL 33004  Qualifying Fee March 8, 2011 Elec  Check #1034 Paid 1/3/2011	CEIVED FROM:  ign Account of Phipps City of Dania Beach City Clerk's Office 12th Street Beach, FL 33004  Qualifying Fee March 8, 2011 Election  Check #1034 Paid 1/3/2011  TOTAL