EXHIBIT E



RON DESANTIS

Governor

CORD BYRD Secretary of State

December 22, 2023

Wendy Sartory Link
Palm Beach County Supervisor of Elections
c/o Stacey J. Manning, Esq.
240 South Military Trail
West Palm Beach, Florida 33415



Re: DE 23-01 Vote-by-Mail Ballots – Public Records – Political Purposes § 101.62(2), Florida Statutes

Dear Supervisor Link:

This letter responds to your request for an advisory opinion concerning whether the statute prohibits you from providing certain vote-by-mail information prior to "8 a.m. of each day...beginning 60 days before the primary until 15 days after the general election" to the entities entitled to this information. See §101.62(2), Fla. Stat. (2023). Additionally, you ask whether it is the Division's position that the term, found at the conclusion of section 101.62(2), "for political purposes only," refers only to registered political committees. Because you are a supervisor of elections, are acting related to this statute, and have taken or propose to take action related to whether you must provide the vote-by-mail request information outside of the window specified in the statute, the Division of Elections is authorized to issue an opinion to you pursuant to section 106.23(2), Florida Statutes (2023).

FACTS

Your request for an advisory opinion asks whether under section 101.62(2), Florida Statutes, you are allowed to, or forbidden from, providing the confidential and exempt voter information submitted with the vote-by-mail request, to the entities entitled to this information as specified in the statute, prior to 60 days before the primary and/or later than 15 days after the general election. You also ask whether it is the Division's position that the term "for political



Wendy Sartory Link December 22, 2023 Page 2 of 3

purposes only," which is at the end of section 101.62(2), refers only to registered political committees. See § 101.62(2), Fla. Stat.

<u>ANALYSIS</u>

Florida law requires that supervisors of elections record the following information when receiving a vote-by-mail request:

For each request for a vote-by-mail ballot received, the supervisor shall record the following information: the date the request was made; the identity of the voter's designee making the request, if any; the Florida driver license number, Florida identification card number, or last four digits of the social security number of the voter provided with a written request; the date the vote-by-mail ballot was delivered to the voter or the voter's designee or the date the vote-by-mail ballot was delivered to the post office or other carrier; the address to which the ballot was mailed or the identity of the voter's designee to whom the ballot was delivered; the date the ballot was received by the supervisor; the absence of the voter's signature on the voter's certificate, if applicable; whether the voter's certificate contains a signature that does not match the voter's signature in the registration books or precinct register; and such other information he or she may deem necessary.

§ 101.62(2), Fla. Stat.

This same statute then explains that vote-by-mail information shall remain confidential and exempt except that "this information" is provided as follows:

- This information must be provided in electronic format as provided by division rule.
 The information must be updated and made available no later than 8 a.m. of each day, including weekends, beginning 60 days before the primary until 15 days after the general election and shall be contemporaneously provided to the division.
- 2. This information is confidential and exempt from section 119.07(1) and shall be made available to or reproduced only for the voter requesting the ballot, a canvassing board, an election official, a political party or official thereof, a candidate who has filed qualification papers and is opposed in an upcoming election, and registered political committees for political purposes only.

Id.

In response to your first question, the statute states that "this information" is confidential and exempt and shall be "made available to or reproduced only for" the specific entities. The

^{1.} For the purposes of this Advisory Opinion, "specific entities" means "the voter requesting the ballot, a canvassing board, an election official, a political party or official thereof,

Wendy Sartory Link December 22, 2023 Page 3 of 3

statute explains that "[t]he information must be updated and made available no later than 8 a.m. of each day, including weekends, beginning 60 days before the primary until 15 days after the general election and shall be contemporaneously provided to the division." The Division interprets this to mean that "this information" is confidential and exempt except during the window "beginning 60 days before the primary until 15 days after the general election." During that window, the information "must be updated and made available," to the six entities. "[M]ade available" is a constraint on when the supervisors may release this confidential and exempt information. Thus, under the statute, "this information" remains confidential and exempt except for 60 days before the primary until 15 days after the general election." Moreover, only the six entities may request this information during that window.

Likewise, per this statute and Florida Administrative Code Rule 1S-2.043, you are required to provide this information to the Division during the same timeframe. See §101.62(2) ("This information must be provided in electronic format as provided by division rule."). Rule 1S-2.043 states that any one of the six entities, "may access online daily county files of vote-by-mail ballot request information as directly received from the Supervisor and posted on the Division's website." However, consistent with the time constraint in section 101.62(2), the Division removes "this information" from access the day after the last file is transmitted on the 15th day after the election.²

Regarding your second question, the Division has previously stated that "for political purposes only," as used at the end of section 101.62(2), refers only to the registered political committees. See DE 18-02 n.1 ("The phrase "for political purposes only" modifies only "registered political committees.³" See § 101.62([2]), Fla. Stat.).

SUMMARY

The confidential and exempt information that you record can only be "[made] available" beginning 60 days before the primary until 15 days after the general election. As to the second question, at the conclusion of Florida Statute section 101.62(2), "for political purposes only" refers only to the registered political committees.

Respectfully,

Maria I. Matthews, Esq. Director, Division of Elections

a candidate who has filed qualification papers and is opposed in an upcoming election, and registered political committees for political purposes only.

^{2.} This timeline applies to the presidential preference primary election, primary election, general election, and special elections.

^{3. &}quot;Political committee" is defined in section 106.011(16), Florida Statutes (2023).



24-3717CI

UBLIC RECORDS REQUEST- VOTE BY MAIL BALLOT REQUESTS

hristopher Gleason <gleasonforpinellas@gmail.com>

Wed, Jul 17, 2024 at 12:05 F

BRAN

: Matt <masmith@votepinellas.gov>, Dustin Chase <dchase@votepinellas.gov>, OECS@dos.myflorida.com, publicrecordsrequest publicrecordsrequest@votepinellas.gov>, Maria.Matthews@dos.myflorida.com, "Byrd, Cord" <cord.byrd@dos.myflorida.com>

Dear Custodian of Records.

I am writing to submit an open records request under the Article I, section 24 of the Florida Constitution, and Chapter 119 Florida Statutes seeking access to public records, Florida State Election Records, and Federal Election Records related to the action wing:

• Copies of any and all Logs, List(s) and/or documents of the Pinellas County Voters who have requested a Vote of Mar Ballot be mailed to them for the August 20th Primary Election

I am requesting these public records in the electronic file format .PDF.

I understand that some of this information may already be publicly available, but I are seeking the official and comprehensive records directly from the county's election authorities to ensure accuracy and completeness.

Please consider this letter as a formal request for disclosure under the Article I, section 24 of the Florida Constitution, and Chapter 119, Florida Statutes.

Please provide these records in a format that is consistent with the requirements of the Article I, section 24 of the Florida Constitution, and Chapter 119, Florida Statutes If possible, We request that the records be provided electronically, via email or a secure file-sharing platform.

If portions of the requested records are exempt from disclosure under the Article I, section 24 of the Florida Constitution, and Chapter 119. Florida Statutes, please provide us with a written explanation of the specific legal basis for any redactions or withholdings.

We request that this public records request be processed promptly and in accordance with the statutory timelines for response and production of records under the Article I, section 24 of the Florida Constitution, and Chapter 119, Florida Statutes.

I hereby certify that I will not:

- (A) Use any list of name(s) or addresses contained in or derived from the records or information for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed
- (B) Sell, give, or otherwise make available to any person any list of name(s) or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed.

As per Article I, section 24 of the Florida Constitution, and Chapter 119, Florida Statutes, we expect a prompt response to this request. If, for any reason, you cannot comply with this request within the specified timeframe, please provide a written explanation for the delay and indicate when we can expect the records to be made available.

Please take appropriate steps to ensure that records responsive to this request are not deleted by your office before the completion of processing for this request. If records potentially responsive to this request are likely to be located on systems where they are subject to potential deletion, including on a scheduled basis, please take steps to prevent that deletion, including, as appropriate, by instituting a litigation hold on those records. To ensure that this request is properly construed, that searches are conducted in an adequate but efficient manner and that extraneous costs are not incurred.

By working together at the outset, The Justice Society and your agency can decrease the likelihood of costly and time-consuming litigation in the future.

Where possible, please provide responsive material in electronic format by email or via a shared online drive.

Warmest Regards,

Christopher Gleason

Candidate for Supervisor of Elections Pinellas County, Florida



UBLIC RECORDS REQUEST- VOTE BY MAIL BALLOT REQUESTS

hase, Dustin <dchase@votepinellas.gov>

Thu, Jul 25, 2024 at 4:01 F

- : "GleasonforPinellas@gmail.com" <gleasonforpinellas@gmail.com>,
- publicrecordsrequest <publicrecordsrequest@votepinellas.gov>

Dear Mr. Gleason.

As a candidate with opposition, you are entitled to the list of mail ballot requests after filing your oath of acquisition.

Additionally, please be advised that fulfilling your request as stated would require an estimated 18,000 hours to compile the logs and documents for each voter who requested a mail ballot. Given this substantial time requirement, there will be significant costs associated with the retrieval, review, and redaction of these records.

Under Florida law, we are permitted to charge a special service fee for the extensive use of information technology resources and/or clerical or supervisory assistance required to process your request. The estimated cost for fulfilling your request will be provided upon determining the exact scope and volume of records responsive to your request. Please note that these costs are based on actual labor and resources incurred by the Supervisor of Elections Office.

We are prepared to work with you to narrow the scope of your request to make it more manageable and cost-effective. For instance, if there are specific types of logs or subsets of information you are most interested in, please let us know so we can focus our efforts accordingly.

Furthermore, please be informed that any exempt or confidential information will be redacted in accordance with the applicable Florida Statutes.

To proceed, we invite you to either narrow the scope of your request to reduce the estimated time and resources required, or we can provide a full cost estimate for processing the entire request as currently stated. Please let us know your preference and any specific subsets of the requested information you are requesting. If a response is not received within 30 days of this correspondence, we will consider the request closed.

Sincerely,

Dustin Chase, Deputy Supervisor of Elections

Representing Julie Marcus, Pinellas County Supervisor of Elections

13001 Starkey Rd., Largo, FL 33773

Phone: (727) 464-4988

Fax: (727) 464-6239

dchase@votepinellas.gov

Follow us @VotePinellas

Like us on Facebook

Under Florida law, 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. — F.S. 668.6076

I, JAMES M. BROWN JR, am over the age of 18 and do swear the following:

FILED ST. PETERSBURG BRANCH 2024 AUG 20 PM 2: 34

1. I am a resident of Pinellas County, Florida. My current address is:

100 BLUFF VIEW DR. ADT 211A BELLEVIR BLUFFS FL 33770

- 2. On a Afour July 16., I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August , 19, 2024.

Sames M. Blown F
Signature

. JAMES M. BROWN JR Full Name

STATE OF FLORIDA	
COUNTY OF PINELLAS	
Sworn to (or affirmed) and subscribed physical presence or online day of August, 2024, 1	ribed before me by means of notarization, this 19th by James M. Rrawn Jr.
CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Signature of Notary Public Florida) Chestine Peters
	(Print, Type, or Stamp Commissioned
	Name of Notary Public)
	Personally Known MOR
4.5	Produced Identification □
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	Type of Identification Produced

" l i

COUNTY OF PINELLAS
I, And Whisher, am over the age of 18 and do swear the following:
1. I am a resident of Pinellas County, Florida. My current address is:
99 Delphin DR N. alosmap, FL34677
2. On The But 7/k/24, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)

- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on Quart 16, ____, 2024.

	Signature
	AND Whisher Full Name
STATE OF FLORIDA COUNTY OF Brie	Ulas
Sworn to (or affirmed) and sub- physical presence or □ onlined of <u>August</u> , 2024	scribed before me by means of ne notarization, this
CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Signature of Notary Public Florida) Christine Testers (Print, Type, or Stamp Commissioned)
	Name of Notary Public) Personally Known ☑OR Produced Identification □
	Type of Identification Produced

I, Kathleen A. Shanks, am over the age of 18 and do swear the following:

1. I am a resident of Pinellas County, Florida. My current address is:

2755 Curlew Rd Lot 76 Palm Harbor, FL 34654.

- 2. On <u>or about July 16, 24</u>, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on <u>08-27</u>, ____, 2024.

	Kathleen A. Shanks Full Name
STATE OF FLORIDA COUNTY OF PINELIAS	
Sworn to (or affirmed) and subsorphysical presence or online day of August, 2024,	notarization this 774h
CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Signature of Notary Public Florida)
COFFIG	(Print, Type, or Stamp Commissioned Name of Notary Public)
	Personally Known MOR Produced Identification □
	Type of Identification Produced

Rathleon A Slanks

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

Voter's mailing address for ballot: (only if different than State: Zip code: Coun home address) Please update my residential address and/or my mailing address	If no FL OL or FL ID, then provide E: Zip code: City:
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Designee's driver license or identification card number: Designee's relationship to the voter: Spouse Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent of voter's spouse	If no last 4 digits of Social Security Number: If no DL or ID, then provide ID Sibling of voter's spouse ID Voter's legal guardian
Designee's driver license or identification card number: Designee's relationship to the voter: Spouse Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent Grandparent of voter's spouse	If no last 4 digits of Social Security Number: If no DL or ID, then provide ID Sibling of voter's spouse ID Voter's legal guardian
Designee's driver license or identification card number: Compared to the voter	If no last 4 digits of Social Security Number: If no DL or ID, then provide ID Sibling of voter's spouse ID Voter's legal guardian
Designee's driver license or identification card number: Compared to the voter	Zip code: If no last 4 digits of Social Security Number. ID, then provide Sibling of voter's spouse □ Voter's legal guardian □ Designee for a voter with a disability use
Designee's driver license or identification card number. Designee's driver license or identification card number. Designee's relationship to the voter:	Zip code: If no last 4 digits of Social Security Number: DL or ID, then provide If no last 4 digits of Social Security Number: DL or ID, then provide ID Sibling of voter's spouse □ Voter's legal guardian Designee for a voter with a disability ID Designee for a voter with a disability

Rule 1S-2.055, F.A.C.

I, LArol Kay fray and over the age of 18 and do swear the	
1. I am a resident of Pinellas County, Florida. My current address is:	
1500 Edna Ave. NW, Largo FL 33770	5

- 2. On Jour July 20 I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on Jug Most 27, 2024.

	Karol Kay Pravda Full Name
STATE OF FLORIDA Pinelle	5
Sworn to (or affirmed) and subscipling physical presence or online day of August, 2024,	ribed before me by means of notarization, this
	Christin Letin
	(Signature of Notary Public Florida)
CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known ☑OR Produced Identification □
	Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

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DS-DE 160 (eff. 04/17/2024

Rule 1S-2.055, F.A.C.

I,follo	Hour owing:	< Kon	NAND, a	m over th	ne age of 18 a	nd do swear the
1.	Iamar	resident of	Pinellas Coun	ty, Florid	a. My curren	t address is:
	313			and the second	TOTAL .	33703

- 2. On otal July 16 I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August, 27, 2024.

Signature

THOMAS G. ROMANO

Full Name

STATE OF FLOR COUNTY OF	IDA Pinellas	
Sworn to (or affirm physical present day of	med) and subscince or □ online	ribed before me by means of notarization, this 27h by Thomas Romano.
		Christin Petro
		(Signature of Notary Public Florida)
	HRISTINE PETERS	(Print The Color
	res February 26, 2028	(Print, Type, or Stamp Commissioned Name of Notary Public)
		, , , , , , , , , , , , , , , , , , , ,
		Personally Known ZOR Produced Identification
		1 loggeorg (delignication [7]
		Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

last 4 digits of Social Security Number: Zip code: City: with the information listed above. election. If you only want a ballot for
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Ballot for someone else.
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last 4 digits of Social Security Number:
1
ing of voter's spouse er's legal guardian
ignee for a voter with a disability
Contract of the state of the st
Date: / /
- I

I, Khonda Romano, am over the age of 18 and do swear the following:

1. I am a resident of Pinellas County, Florida. My current address is:

5313 18th St. WE

- 2. On or about Julielle I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August, 27, 2024.

690	RR Q Roman
	Rhonda Romano Full Name
STATE OF FLORIDA COUNTY OF PINEILAS	
Sworn to (or affirmed) and subscr physical presence or □ online in day ofAugust, 2021, b	ibed before me by means of notarization, this 27th py Rhonda Romano.
•	Chuster Peter (Signature of Notary Public Florida)
CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known ☑OR Produced Identification □
	Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

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homotopisco (g			_ voter's Da	te of Birth:/_	
Voter's Florida driver license (FL DL) or Florida ide	entification (FL ID) card number:			
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			DL or FL ID, then		
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and the request is good for all a	elections through	n the end of the calendar year of the	next general	election. If you only wan	t a ballot for
1. T. 1. T. T. I. J. T. J.		The end of the calendar year of the			
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DS-DE 160 (eff. 04/17/2024

Rule 1S-2.055, F.A.C.

I, _ follo	MAURETU ZILLES, am over the age of 18 and do swear the owing:
1.	I am a resident of Pinellas County, Florida. My current address is:
	8392 MEHDON ROCK DR. EAST, LARGO, Fl. 33777.

- 2. On or about 7/25/1/4, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August, 28, 2024.

	Mossicia Bille
	Full Name
STATE OF FLORIDA	
Sworn to (or affirmed) and subscript physical presence or □ online day of ☐ 000 of ☐ 202 ☐ , 202 ☐ ,	notarization, this _ 28th
CHRISTINE PETERS	(Signature of Notary Public Florida)
Commission # HH 498653 Expires Fubruary 26, 2028	(Print, Type, or Stamp Commissioned Name of Notary Public)
	Personally Known ☑OR Produced Identification □
	Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section. To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

		Voter's Dat	e of Birth:	,
Voter's Florida driver license (FL DL) or Florida				······································
	definition (PL ID) card number.	If no FL DL or FL ID, then provide		curity Number.
Voter's Home Address:				
City:	State:		Zip code:	
Voter's mailing				
(only if different than State: Z home address)	ip code: Country, if ou	tside US:	Jity.	
Please update my □ residential addres	s and/or my 🗆 mailing address in my v	oter record v	with the information lis	ted above
Phone number (optional):				
This request is good for all elections throus pecific elections, list them here:	igh the and of the sales decrees of the		2000an 121 5	
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DS-DE 160 (eff. 04/17/2024

Rule 1S-2.055, F.A.C.

AFFIDAVIT
STATE OF FLORIDA

LouAm M. Rice COUNTY OF PINELLAS

I, on Behalf of Simone MRICE (mother) Now Deceased

following:

COUNTY OF PINELLAS

Am over the age of 18 and do swear the

1. I am a resident of Pinellas County, Florida. My current address is:

1209 E. Boyer St., Parpon Springs, FL 34689

2. On orabout 7/16/24 I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail and below) on behalf of my mother

3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.

- I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on Aug 294h, ____, 2024.

Signature on behalf of
Simone M. Rice
Full Name

STATE OF FLORIDA COUNTY OF Pinellas	
Sworn to (or affirmed) and subsolution physical presence or □ online day of August, 2024,	eribed before me by means of notarization, this 2946 by Lev Ann Marie Rice.
CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Signature of Notary Public Florida)
	(Print, Type, or Stamp Commissioned Name of Notary Public)
	Personally Known ☑OR Produced Identification □
	Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

		Voter's Date of Birth:/	1
Voter's Florida driver license (FL DL) or Florida	7 idontification (72 to	Voter's Date of Birth:/	'
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And the same of th		ID, then	
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	0.1		
Voter's mailing	State:	Zip code:	
		City:	
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rease update my I residential addres	s and/or my [] mailing address :		
	10 00000 T.C.	and the unormation listed ar	OVA
Phone number (optional):	Email address (
his request is and i	Linal address (optional):		
This request is good for all elections throus pecific elections, list them here:	igh the end of the calendar year of the n	ext deneral plactice.	X 5700 ==
pecific elections, list them here:		ext general election. If you only want a l	pallot for
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DS-DE 160 (eff. 04/17/2024

Rule 1S-2.055, F.A.C.

LouAnn Rice 1209 E Boyer St. Tarpon Springs, FL 34689 (also Simone Rice's address) 8/27/2024

Reference:

Simone Marie Rice's Request for a mail in ballot 6/23/2024, as seen on Pinellas County web site.

At age 90 and a few years previous, I helped my mother obtain her mail in vote when she was not capable.

I also drove my mother to the polls to turn in her mail in ballot and vote later when she was capable.

This week I looked back I looked back at files I had because I could not remember re-requesting a mail in ballot this spring as I understand was required if mom wanted to continue to vote by mail.

Initially I mistakenly saw in my files the Vote by mail ballot envelope I copied 2/22/2024 and thought that was it but it was actually her return envelope for the 2024 Presidential Primary.

I am sure I would have saved a copy of the website page confirming if I had RE-requested to continue her voting by mail but I have none and know I put it off because I was unsure about my mother's multiple health issues at that point, June 2024.

By June 23rd 2024, the supposed date my mother requested to continue with Mail-In Voting, my mother was on a fast decline.

Simone had been on pain killers and recently anti-depressants both making wading through political conversation impossible and un-important.

My mother was bed ridden since her last operation, had no computer and was incapable of using her smart phone to navigate to any website.

I swear, because of her state of health, there is **No Way** I requested a Mail in ballot for my mother on June 23rd, 2024.

I knew she would not last much longer and unfortunately was proven to be correct as she passed away 16 days later.

I still have the unopened mailed ballot received shortly before she passed.

I do not see any Postal Stamped Date indicating when it was mailed.

LouAnn M Rice



JULIE MARCUS SUPERVISOR OF ELECTIONS PINELLAS COUNTY

OFFICIAL BALLOTING MATERIAL FIRST-CLASS MAIL

DO NOT FORWARD



NON PROFIT ORG US POS TAGE PAID ST. PETERSBURG, FL PERMIT #4020

SIMONE M RICE

1209 E BOYER ST TARPON SPRINGS FL 34689
84270000150

իրանուրդ և արդրանականին արդարանի արդարանի հայարարան արդարանում և հայարանական արդանական արդանական արդանական արդ SIMONE M RICE 1209 E BOYER ST TARPON SPRINGS FL 34689

G113

- I, Nancy Skinner-Ericscoam over the age of 18 and do swear the following:
- 1. I am a resident of Pinellas County, Florida. My current address is:

1449 Ridge Shore Or Tarpon Springs Fl 34689

- 2. On <u>craboo+ 7-16-24</u> I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on <u>August</u>, 29, 2024.

7	Full Name
STATE OF FLORIDA COUNTY OF PIOE AS	
Sworn to (or affirmed) and subsciply physical presence or online day of August, 2024, CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Signature of Notary Public Florida) (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known DOR Produced Identification
*	

Type of Identification Produced

Signature

I, Christian M. Ott, am over the age of 18 and do swear the following:

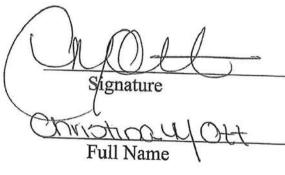
1. I am a resident of Pinellas County, Florida. My current address is:

3300 Fox Chate Civ #216 Palm Harbor F1 34683

- 2. On Solution of August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on Avq 27, 2024.



Type of Identification Produced

STATE OF FLORIDA	
COUNTY OF PIVELLOS	
Sworn to (or affirmed) and subscipling physical presence or \square online day of \square 0024,	notarization this 2747
	Christin Peters
	(Signature of Notary Public Florida)
CHRISTINE PETERS	
* Commission # HH 496653	(Print, Type, or Stamp Commissioned
Expires February 26, 2028	Name of Notary Public)
	Personally Known ☐OR Produced Identification ☐

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section. To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

/oter's Name:				voter s Dai	
		identification (FL ID) card			
				If no FL DL or FL ID, then provide	last 4 digits of Social Security Number.
oter's Home Addres					
ity:			State:		Zip code:
Voter's mailing					City:
only if different than nome address)	State: Zi	p code:	Country, if ou	tside US: _	
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(not required if ve	oter is an absent ur	niformed services vo	ter or overseas vote		_Date: / / est is made by a designee)
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You must also resignee's Name: resignee's Home Addity: resignee's driver license or resignee's driver license or resignee's relations	complete the sec	niformed services voluments on below if you are niber. Email addr	ter or overseas vote re requesting a VoState: ress (optional):	If no DL or ID, then provide	Date: / /
You must also resignee's Name: resignee's Home Add rity: resignee's driver license or resignee's relations Designee's relations Spouse Parent	complete the secure is an absent uncomplete the secure is an absent uncomplete the secure is identification card numbers is	niformed services vol	re requesting a Vo	If no DL or ID, then provide	Date: / /

DS-DE 160 (eff. 04/17/2024

Rule 1S-2.055, F.A.C.

I, Meriane Segal, am over the age of 18 and do swear the following:
1. I am a resident of Pinellas County, Florida. My current address is:
2416 World Parkway Blod #14 Clearwater, 71.3376=
2. On July 16, 2024, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail
Ballot)

- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on Aug 24, 24, 2024.

Full Name

STATE OF FLORIDA
COUNTY OF PINCHAS

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 24th

Gignature of Notary Public Florida)

(Signature of Notary Public Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

CHRISTINE PETERS
Commission # HH 496653
Expires February 26, 2028

Personally Known For Produced Identification
Produced Identification

Signature

Type of Identification Produced

I, Kebin Devine, am over the age of 18 and do swear the following:
1. I am a resident of Pinellas County, Florida. My current address is: 12760 Indian Rocks Rd Drut 571 (avgo FL 33774)
2. On Apply 2 10 24, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June

- 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on 1949 45+14, ____, 2024.

Type of Identification Produced



AFFIDAVIT

STATE OF FLORIDA

COUNTY OF PINELLAS

I, [Your Full Name] Robert A. Fesci, being duly sworn, depose and say:

1.	Personal	1	nf	orr	ทล	tio	n·

	•			
-	l am a	resident of	Pinellas County.	Florida.

- My current address is [Your Full Address] 7602 Ridge Rd. Seminol Fl 33772.

- My date of birth is [Your Date of Birth] 08/12/1950

- My date of birth is [Your Date of Birth] _ O & ,

2. Statement of Facts:

- 06/23/21, | received a vote-by-mail ballot at - On [Date You Received the Ballot] my residence.
- I did not request a vote-by-mail ballot for the 2024 Primary Election on 06/23/2024.
- I have not authorized anyone to request a vote-by-mail ballot on my behalf on 06/23/2024.
- I have confirmed with that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- I did not sign a DS-DE 160 Form requesting a Vote-By-Mail Ballot a copy of attached.

3. Conclusion:

- To the best of my knowledge, this vote-by-mail ballot was sent to me without my request or authorization.
- I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors.

I declare under penalty of perjury that the foregoing is true and correct.
Executed on [Date] [4/24 at Clearva ter, FL. [City, State].
[Your Full Name] Robert A. Fessi [Your Signature] Abb & Fensi
NOTARY ACKNOWLEDGMENT
STATE OF FLORIDA
COUNTY OF PINELLAS
Sworn to (or affirmed) and subscribed before me by means ofphysical presence or online notarization, this day of, 20, 20, by [Your Full Name].
(Signature of Notary Public) CHRISTINE PETERS Commission# HH 496653 Expires February 26, 2028
(Name of Notary, typed, printed, or stamped)
Personally Known OR Produced Identification Type of Identification Produced:

FIRE

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

own o Italile.		Voter's Date of Birth:
de de de		
Voter's Florida driver license (FL DL) or Florida	identification (FL ID) card number:	If no FL last 4 digits of Social Security Number:
		If no FL DL or FL ID, then towide
/oter's Home Address:		
City:	31	Zipcode
Voter's mailing address for ballot:		City:
(only if different than State: Zi home address)	p code:	tside US:
	W 2 16	voter record with the information listed above.
Phone number (optional):	Email address (optional):	
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You must also complete the sec esignee's Name: esignee's Home Address:	tion below if you are requesting a Vo	zip code: If no last 4 digits of Social Security Number: DL or
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You must also complete the sect esignee's Name: esignee's Home Address: Ity: Designee's driver license Adentification card number (optional): Designee's relationship to the voter: Spouse Grandparent	State: Email address (optional): Description of voter's spouse Child of voter's spouse	Zip code: If no last 4 digits of Social Security Number: DL or ID, then provide Sibling of voter's spouse Voter's legal guardian
You must also complete the second sesignee's Name: Designee's Home Address: Designee's driver license dentification card number (optional): Designee's relationship to the voter: Spouse Grandparent	State:Email address (optional):	zip code: If no last 4 digits of Social Security Number: DL, or ID, then provide Sibling of voter's spouse
You must also complete the sectors and absent units also complete the sectors and also complete	State: Email address (optional): Description of voter's spouse Child of voter's spouseGrandparent of voter's spouse	Zip code: If no last 4 digits of Social Security Number: DL or ID, then provide Sibling of voter's spouse Voter's legal guardian
You must also complete the sectors and absent units also complete the sectors and also complete	State: Email address (optional): Description of voter's spouse Child of voter's spouseGrandparent of voter's spouse	Zip code: If no last 4 digits of Social Security Number: DL or ID, then provide Sibling of voter's spouse Voter's legal guardian
Posignee's Name: Designee's Home Address: Designee's Home Address: Designee's driver license dentification card number (optional): Designee's relationship to the voter: Spouse Grandparent Parent Grandchild	State: Email address (optional): Description of voter's spouse Child of voter's spouseGrandparent of voter's spouse	Zip code: If no last 4 digits of Social Security Number: DL or ID, then provide Sibling of voter's spouse Voter's legal guardian

I, CATHICHAMBERLAND	, am over the age of 18 and do swear the
following:	

1. I am a resident of Pinellas County, Florida. My current address is:

10520 SAN FERNANDO BLVD NE; ST. PETERSBURG, FZ. 3370Z

- 2. On 7-/8-2024, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August , 17, 2024.

CATHI CHAMBERLAIS Full Name STATE OF FLORIDA COUNTY OF Pinpllas Sworn to (or affirmed) and subscribed before me by means of □ physical presence or □ online notarization, this , 2024, by day of August **CHRISTINE PETERS** (Signature of Notary Public Florida) Commission # HH 496653 Expires February 26, 2028 (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known **MOR** Produced Identification □ Type of Identification Produced

Signature

AFFIDAVIT (Amendment to AFFIDAVIT Signed Aug. 17, 2024) STATE OF FLORIDA COUNTY OF PINELLAS

- I, Cathi Chamberlain, am over the age of 18 and do swear the following:
 - 1. I am a resident of Pinellas County, Florida. My current address is: 10520 San Fernando Boulevard, NE; St. Petersburg, FL 33702.
 - 2. I am adding documents related to my Affidavit signed on August 17, 2024 (ATTACHMENT A)
 - 3. "5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election." (ATTACHMENT B and C)
 - 4. "6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot." (ATTACHMENTS B and D)
 - 5. The Pinellas Supervisor of Elections (SOE) and I both agree I did not request a Vote by Mail Ballot on June 23, 2024, yet when I researched my name on the SOE Website, a side portal seemingly shows that I did. (ATTACHMENTS B and E).
 - 6. I am concerned about the integrity of my voter registration information even more at this point than I was when I submitted my previous affidavit signed on August 17th, 2024 (Attachment A) and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

following: am over the age of 18 and do swear the

I am a resident of Pinellas County, Florida. My current address is:

10520 SAN SKRANDO BLUE BUYERS HICKSONSCY, DUNGTON

- 2. On 7-15-3, 30 I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence (Date Received the Vote By Mail
- I did not request a vote-by-mail ballot for the 2024 Primary Election on June
 23, 2024 which is the date Pinellas County Supervisor of Elections is showing that
 I requested my vote by mail ballot.
- I have not authorized anyone to request a vote-by-mail bailot on my behalf.
- I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6 I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- Upon information and belief and to the best of my knowledge, this
 vote-by-mail ballot was sent to me unlawfully, and without my request or
 authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on Ascust 17 , 2024.

Signature

CATH CHAMBERCAID

STATE OF FLORIDA
COUNTY OF PLOS 1/05

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 1777h day of August, 2024, by athi hamber are



CHRISTING PETERS Commission of MH 456853 Society February 28, 2022 (Signature of Notary Public Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known MOR.
Produced Identification

Type of Identification Produced

.FW: public records request

Chase, Dustin <dchase@votepinellas.gov>

Thu 8/15/2024 11:59 AM

To:Rules for Deplorables <cathi@rulesfordeplorablesbook.com>
Cc:Chase, Dustin <dchase@votepinellas.gov>;Smith, Matt <masmith@votepinellas.gov>;McKnight-Taylor, Ashley <ataylor@votepinellas.gov>

Dear Cathi,

It was nice to talk to you today.

The information you've requested is confidential and exempt from disclosure under Florida law (see Section 101.62(2), Florida Statutes). Granted, there is an exception for the voter themselves. Typically, we require the voter to visit our office and present identification to obtain this information. In your case, we are making an exception because we know you, you confirmed with us you sent the email and you verified the last four of your social security number with me.

You mentioned you believe you requested your mail ballot on June 23, 2024. Our records indicate you actually requested it last year on May 19, 2023, at 4:41 p.m. This aligns with the fact that we sent you a mail ballot for the Presidential Preference Primary, which was not returned as undeliverable or voted. Our records also show you voted in person at your polling place on March 19.

Regarding the DS-DE 160 form, The Florida Division of Elections <u>did not finalize the form until nearly a year after</u> you submitted your request. The law does not require all voters requesting mail ballots to file a DS-DE 160: only voters requesting a mail ballot <u>in writing</u>. Since you requested your mail ballot online using your driver license number, there is no DS-DE 160 on file for you. Thereby, we have no records responsive to your request.

We hope that you will help to clarify this process and dispel any misinformation.

Sincerely,

Dustin Chase, Deputy Supervisor of Elections Representing Julie Marcus, Pinellas County Supervisor of Elections 13001 Starkey Rd., Largo, FL 33773

Phone: (727) 464-4988
Fax: (727) 464-6239
dchase@votepinellas.gov
Follow us @VotePinellas
Like us on Facebook

Under Florida law, 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. -- F.S. 668.6076

Conforme a la legislación de Florida, las direcciones de correo electrónico son registros públicos. Si no desea que su correo electrónico se divulgue como respuesta a una solicitud de registros públicos, no envíe un correo electrónico a esta entidad. En su lugar, póngase en contacto con esta oficina por teléfono o por escrito. -- F.S. 668.6076

From: Rules for Deplorables <cathi@rulesfordeplorablesbook.com>

Sent: Tuesday, August 13, 2024 7:34 PM

To: Mail, Election <election@votepinellas.gov>; Chase, Dustin <dchase@votepinellas.gov>; Marcus, Julie

<jmarcus@votepinellas.gov>
Subject: public records request

AMENDMENT C

Form Name: View Web Absentee Request Captured: 8/26/2024 8:48:51

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Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

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Voter's Name:		voter S Da	te or sirm:/
Voter's Florida driver license (FL DL) or Florida	a identification (FL ID) card number:	If no FL DL or FL ID, then provide	last 4 digits of Social Security Number.
Voter's Home Address:		3	9 31 22
Cifv:			
City:	State:		Zip code:
Voter's mailing address for ballot:	27 : VAC 277370 MALTER 940		0 24 140 33 555 1
(only if different than State:z	Y	tside US:	Sily.
Please update my residential addres			
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This request is good for all elections throuspecific elections, list them here:	igh the and action is a		
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Complete the form to:

- Check the status of your mail ballot
 View where to yote on Election Day
 Mew sample ballots
 See upcoming afections

- Review update your voter registration information
 Review your voting activity for the past 12 months.

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2024 Primary Election

Voter Status: You are scheduled to receive a mail ballot for this election.

View Sample Ballet

Your Mail Ballot Information

Ballot 1 Status



Ballot 1 Requested by Voter

Date Requested: Sunday, June 23, 2024

10520 SAU FERHANDO BLVD NE ST PETERSSURG, FL 32702

Important Dates

Election Day: Tuesday, August 20, 2024 Registration Closes: Monday, July 22, 2024 Early Voting Begins: Saturday, August 10, 2024 Early Voting Ends: Sunday, August 18, 2024

Election Day Polling Location: Epiphony Ukrainian Catholic Church 434 90 Ave N St Petersburg, FL 23702

View Berlin Verley Locations



AFFIDAVIT

STATE OF FLORIDA

COUNTY OF PINELLAS

I, [Your Full Name] Robert A. Fesci, being duly sworn, depose and say:

1		Persona	1	Information:
•	•	. 0100110		mnomiation.

-1	am	a re	esident	of	Pinellas	County.	Florida.
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- My current address is [Your Full Address] 7602 Ridge Rd. Seminol FL 33772.

- My date of birth is [Your Date of Birth] 08/12/1950

- My date of birth is [Your Date of Birth] _ O & ,

2. Statement of Facts:

- 06/23/24, I received a vote-by-mail ballot at - On [Date You Received the Ballot] my residence.
- I did not request a vote-by-mail ballot for the 2024 Primary Election on 06/23/2024.
- I have not authorized anyone to request a vote-by-mail ballot on my behalf on 06/23/2024.
- I have confirmed with that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- I did not sign a DS-DE 160 Form requesting a Vote-By-Mail Ballot a copy of attached.

3. Conclusion:

- To the best of my knowledge, this vote-by-mail ballot was sent to me without my request or authorization.
- I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors.

	I declare under penalty of perjury that the foregoing is true and correct.
	Executed on [Date] \$ 14/24 at Cleurva tel, Fl. [City, State].
	[Your Full Name] Robert A. Ferri [Your Signature] Abb & Leni
	NOTARY ACKNOWLEDGMENT
	STATE OF FLORIDA
	COUNTY OF PINELLAS
	Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of AUGUST_, 2024, by [Your Full Name].
^	(Signature of Notary Public) CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028
	(Name of Notary, typed, printed, or stamped)
	Personally Known OR Produced Identification Type of Identification Produced:

Statewide Vote-By-Mail Ballot Request Form To request a vote-by-mail ballot for yourself, complete only the top section. To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections. Voter's Name: Voter's Date of Birth: Voter's Florida driver license (FL DL) or Florida identification (FL ID) card number: If no FL last 4 digits of Social Security Number. DL or FI ID, then Voter's Home Address: City: Voter's mailing address for ballot: (only if different than State: _____ Zip code: ____ Country, outside US: home address) Please update my 🗆 residential address and/or my 🖟 malling address in ny voter record with the information listed above. Phone number (optional): Email address (optional): __ This request is good for all elections brough the end of the calendar year of the next general election. If you only want a ballot for specific elections, list them here: Voter's Signature: (not required re-ster is an absent uniformed services voter or overseas voter, or if request is made by a designee) You must also complete the section below if you are requesting a Vote-by-Mail Ballot for someone else. Designee's Name: Designee's Home Address: City: State: Designee's driver license andentification card number: last 4 digits of Social Security Number: If no ID, then provide Phone number (optional): Email address (optional): Designee's relationship to the voter: ☐ Parent of voter's spouse ☐ Sibling of voter's spouse ☐ Spouse □ Grandparent ☐ Child of voter's spouse ☐ Voter's legal guardian □ Parent □ Grandchild ☐ Grandparent of voter's spouse ☐ Designee for a voter with a disability Child . ☐ Sibling ☐ Grandchild of voter's spouse

The voter directly instructed me to make this request for them.

DS-DE 160 (eff. 04/17/2024

Designee's Signature:

Rule 1S-2.055, F.A.C.

I, hebin Devine, am over the age of 18 and do swear the following:	
1. I am a resident of Pinellas County, Florida. My current address is:	
12760 Indian Rocks RD Dut 571 1 avgo FL 3377	4
2. On Apply 2 10 24, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)	
2 T 111	

- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on Augusty, ____, 2024.

Full Name
STATE OF FLORIDA COUNTY OF Phellas
Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 14th day of August, 2024, by Kobin L. Devine.
(Signature of Notary Public Florida)
Christine Btes
(Print, Type, or Stamp Commissioned Name of Notary Public)
Personally Known □OR Produced Identification □
\bigcirc
Type of Identification Produced

I, Valerie Schoeman, am over the age of 18 and do swear the following:

1. I am a resident of Pinellas County, Florida. My current address is:

2533 Skipper Trl, Clearwater, FL 33761

- 2. On or about July 16th, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August, 26th, 2024.

Valerie Ann Schoeman Full Name STATE OF FLORIDA COUNTY OF Pinellas Sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization, this ☐ 36th day of August , 2024, by Valerie Ann SA (Signature of Notary Public Florida) (Print, Type, or Stamp Commissioned CHRISTINE PETERS Name of Notary Public) Commission # HH 496653 Expires February 26, 2026 Personally Known □OR Produced Identification I FL-DL

Signature

Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

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Voter's mailing		State:		Zip code:
address for ballot:		State:		
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Phone a		mailing address in	my voter record	with the information listed above
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This request is good for	all elections th	rough the end of the calendar year of	ilai)	
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	Nikk; lowing:	Schoeman	, an	n over the age of 18 and do swear the	
1.	I am a r	esident of Pinel	las Count	y, Florida. My current address is:	
				Clearwater FL 33761	

- 2. On or about July 16th, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August, 261, 2024.

	Nikki Schoemen Signature Thum Full Norm
STATE OF FLORIDA COUNTY OFPINE 1/as	Full Name
Sworn to (or affirmed) and subscription of physical presence or online day of August, 2021, 1	notowersting 11.
	(Signature of Notary Public Florida)
	(Print, Type, or Stamp Commissioned Name of Notary Public)
CHRISTINE PETERS Commission #HH 496653 Expires February 26, 2028	Personally Known □OR Produced Identification □
FLI	Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form To request a vote-by-mail ballot for yourself, complete only the top section. To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections. Voter's Name: Voter's Date of Birth: ____/ ___/ Voter's Florida driver license (FL DL) or Florida identification (FL ID) card number: last 4 digits of Social Security Number. If no FI OL or FL ID, then provide Voter's Home Address: ___ City: __ State: _____ Zip code: ____ Voter's mailing address for ballot: (only if different than State: ____ Zip code: ____ Country, if outside US: ____ home address) Please update my \Box residential address and/or my \Box mailing address in my voter record with the information listed above. Phone number (optional): _____ Email address (optional): ____ This request is good for all elections through the end of the calendar year of the next general election. If you only want a ballot for Voter's Signature: (not required if voter is an absent uniformed services voter or overseas voter, or if request is made by a designee) You must also complete the section below if you are requesting a Vote-by-Mail Ballot for someone else. Designee's Name: _ Designee's Home Address: _____ _____State: _____ Zip code: _____ Designee's driver license or identification card number: last 4 digits of Social Security Number: DL or ID, then provide Phone number (optional): _____ Email address (optional): ____ Designee's relationship to the voter: ☐ Parent of voter's spouse ☐ Spouse ☐ Grandparent☐ Grandchild☐ Sibling ☐ Sibling of voter's spouse ☐ Child of voter's spouse ☐ Parent ☐ Voter's legal guardian ☐ Grandparent of voter's spouse ☐ Designee for a voter with a disability ☐ Child ☐ Grandchild of voter's spouse Designee's Signature: The voter directly instructed me to make this request for them. __ Date: _____ / _____ / _____

DS-DE 160 (eff. 04/17/2024

Rule 1S-2.055, F.A.C.

I, Vernon following:	1. Verigan	, am over the age of 18 and do swear the
ronowing.		

1. I am a resident of Pinellas County, Florida. My current address is:

10630-95 ST. N. SEMINOLE, FC 33777

- 2. On on Asout 7-14-24, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on <u>AUGUST</u>, <u>ZG</u>, 2024.

VERNON CLARE VERIGAN Full Name STATE OF FLORIDA COUNTY OF PINEILOS Swern to (or affirmed) and subscribed before me by means of day of Avaust , 2024, by Vernon V-eri (Signature of Notary Public Florida) (Print, Type, or Stamp Commissioned Name of Notary Public) CHRISTINE PETERS Commission # HH 496653 Personally Known □OR Expires February 26, 2028 Produced Identification Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section. To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

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you must also signee's Name: signee's Home Addi	complete the sec	niformed services voter or overs tion below if you are requesti State: ber. Email address (optiona	If no DL or ID, then provide	
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You must also signee's Name: signee's Home Addi signee's driver license or in the number (optional): signee's relationshipsouse	complete the sec	state: Email address (optiona Parent of voter's spouse	If no DL or ID, then provide	pate:/
You must also Signee's Name: Signee's Home Addition Fignee's Home Addition Fignee's driver license or in the number (optional): Signee's relationshipsing Spouse	complete the sec	state: Email address (optiona Parent of voter's spouse Grandparent of voter's spouse	If no DL or ID, then provide	
You must also signee's Name: signee's Home Addi signee's driver license or in the number (optional): signee's relationshipsouse	complete the sec	state: Email address (optiona Parent of voter's spouse	If no DL or ID, then provide	pate:/
you must also You must also signee's Name: signee's Home Addition re number (optional): signee's relationshi Spouse	complete the sec	state: Email address (optiona Parent of voter's spouse Grandparent of voter's spouse	If no DL or ID, then provide	pate:/
You must also signee's Name: signee's Home Addi signee's driver license or in the number (optional): signee's relationshipsouse	complete the secress: identification card num p to the voter: Grandparent Grandchild Sibling	state: Email address (optiona Parent of voter's spouse Grandparent of voter's spouse	If no DL or ID, then provide	pate:/

DS-DE 160 (eff. 04/17/2024

Rule 1S-2.055, F.A.C.

I, Nancy Verigan, am over the age of 18 and do swear the following:

1. I am a resident of Pinellas County, Florida. My current address is:

10630-95th St. N. Seminole, FL 33777

- 2. On <u>orabout July 16th</u>, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on <u>July</u>, <u>26</u>, 2024.

	Many an Verigan Full Name
STATE OF FLORIDA COUNTY OF	
Sworn to (or affirmed) and subscription physical presence or online day of August, 2024, 1	notarization, this 2000
-	Christin Peter
. ∞ 	(Signature of Notary Public Florida)
CHRISTINE PETERS	(Print, Type, or Stamp Commissioned Name of Notary Public)
Commission # HH 496653 Expires February 26, 2028	Personally Known □OR Produced Identification ☑
FL-1	Type of Identification Produced

EXHIBIT 1

DS-DE 160 (eff. 04/17/2024)

Statewide Vote-By-Mail Ballot Request Form

To request a vote-by-mail ballot for yourself, complete only the top section.

To request a vote-by-mail ballot for someone who directly instructed you to do so, complete both sections.

	Voter's Date of Birth:
la identification (ELID)	
	If no FL last 4 digits of Social Security Number DL or FL ID, then provide
And the state of t	The second desired that the second se
States	
	Zip code:
Zip code: Country, if ou	City: Itside US:
ee and/ar mu D	
and/or my in mailing address in my	voter record with the information listed above.
Fmail address (optional)	
	Date:// er, or if request is made by a designee)
ction below if you are requesting a Vo	te-by-Mail Ballot for someone else.
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ction below if you are requesting a Vo	te-by-Mail Ballot for someone else. Zip code: If no last 4 digits of Social Security Number. ID, then
State:	te-by-Mail Ballot for someone else. Zip code: If no last 4 digits of Social Security Number. ID, then
State: State:	te-by-Mail Ballot for someone else. Zip code: If no DL or ID, then provide
State: Email address (optional): Parent of voter's spouse	te-by-Mail Ballot for someone else. Zip code: If no DL or ID, then provide Sibling of voter's spouse
State: State: Email address (optional): Parent of voter's spouse Child of voter's spouse	Zip code: Zip code: Sibling of voter's spouse Voter's legal guardian
State: Email address (optional): Parent of voter's spouse	te-by-Mail Ballot for someone else. Zip code: If no DL or ID, then provide Sibling of voter's spouse
State:	Zip code: Zip code: Sibling of voter's spouse Voter's legal guardian
State:	Zip code: Zip code: Sibling of voter's spouse Voter's legal guardian
	State:Country, if our ses and/or my mailing address in my Email address (optional): ugh the end of the calendar year of the r

Rule 1S-2.055, F.A.C.

DS-DE 160 (eff. 04/17/2024

FILED
ST. PETERSBURG BRANG
2024 AUG 20 PM 2: 34

CLERK OF CIRCUST
CLERK OF CREAT
CLERK

- I, JAMES M. BROWN JR, am over the age of 18 and do sweak the following:
- 1. I am a resident of Pinellas County, Florida. My current address is:

100 BLUFF VIEW DR. APT 211A BELLEAIR BLUFFS FL 33770

- 2. On a Afour Thy 16, I received a vote-by-mail ballot for the primary election on August 20th, 2024 at my residence. (Date Received the Vote By Mail Ballot)
- 3. I did not request a vote-by-mail ballot for the 2024 Primary Election on June 23, 2024, which is the date Pinellas County Supervisor of Elections is showing that I requested my vote by mail ballot.
- 4. I have not authorized anyone to request a vote-by-mail ballot on my behalf.
- 5. I have confirmed with the Supervisor of Elections that my name was included in the list of voters who were sent vote-by-mail ballots for the 2024 Primary Election.
- 6. I did not sign or file a DS-DE 160 Form requesting a Vote-By-Mail Ballot. Ex. A.
- 7. Upon information and belief and to the best of my knowledge, this vote-by-mail ballot was sent to me unlawfully, and without my request or authorization.
- 8. I am concerned about the integrity of my voter registration information and request that this matter be investigated to prevent any potential voter fraud or errors, and I file this affidavit in good-faith with no other intention.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on August , 19, 2024.

Sames M. Redwn Je Signature

. JAMES M. BROWN JR Full Name

Type of Identification Produced

STATE OF FLORIDA	
COUNTY OF PINELLAS	
Sworn to (or affirmed) and subsorphysical presence or □ online day of August, 2024,	eribed before me by means of notarization, this 19th by James M. Brown Jr.
CHRISTINE PETERS Commission # HH 496653 Expires February 26, 2028	(Signature of Notary Public Florida) Chestine Peters
	(Print, Type, or Stamp Commissioned
	Name of Notary Public)
	Personally Known MOR
ege B	Produced Identification □

· / / i

S.Davis 9-23-22

PINELLAS COUNTY SUPERVISOR OF ELECTIONS MAIL BALLOT REQUEST FORM [F.S. 101.62(1)(b)]

TROXBURGH CCO124 09-24-2022

BALLOTS ARE NOT FORWARDABLEECEIVED

DATE 09-22-2022 DATE OF BIRTH	(Required by Law)
OTER'S NAME Blown James /	VOTER 10 # 1303 287 LUTER /
OTER'S FL DL/FL ID# of SS# (last 4) (Required by Law)	PHONE #
EGAL RESIDENCE (Voting Residence/Home of Record)	BALLOT(S) REQUESTED FOR:
added # 211A /	Replacement ALL Elections OR Air 8 2022 Election(s) Check if: Military Active (or spouse/dependent) Overseas
RESIDENCE ADDRESS CHANGE NO CHANGE	
AIL TO (if different from residence)	
1 222 HILLTOP BD	Deliver Ballots by:
TUMBLING SHOALS AR 72581	☐ Mail ☐ Email ☐ Fax
OTER'S SIGNATURE SAMES PROWN I	/ /
REQUESTER INFOR	MATION
(COMPLETE SECTION ONLY IF REQUESTER IS	
REQUESTER'S NAME 5elf	PHONE #
REQUESTER'S ADDRESS	
REQUESTER'S FL DL/FL ID# or SS# (last 4) (Required b)	y Law)
RELATIONSHIP TO VOTER MUST BE A SPOUSE, PARENT, CHILD, GRANDPARENT, G	RANDCHILD, SIBLING, IN-LAW, OR LEGAL GUARDIA
EQUESTER'S SIGNATURE	
FORWARD MAIL BALLOT REC	
Supervisor of Elections, 13001 Starkey Phone: 727-464-VOTE (8683) Fax: 727-464-7636	Rd, Largo, PL 33773 Email: MailBallot@VotePinellas.com
CHECK YOUR MAIL BALLOT STATUS	AT: VotaBinalise com
Official Use Cirtly	AT: VotePinellas.com