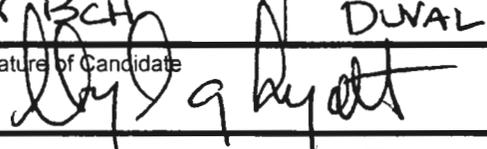
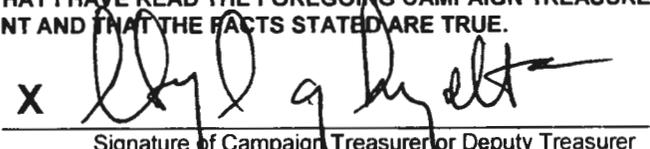


## CITY OF JACKSONVILLE BEACH - 2012

<b>STATE OF FLORIDA</b> <b>APPOINTMENT OF CAMPAIGN TREASURER</b> <b>AND DESIGNATION OF CAMPAIGN</b> <b>DEPOSITORY FOR CANDIDATES</b> (Section 106.021(1), F.S.)  (PLEASE TYPE)		<b>OFFICE USE ONLY</b>  <div style="border: 2px solid black; padding: 10px; text-align: center;"> <b>RECEIVED</b>   <b>MAY 22 2012</b>   <b>City Clerk</b> </div>	
CHECK APPROPRIATE BOX:			
<input checked="" type="checkbox"/> Original Appointment		<input type="checkbox"/> Deputy Treasurer	
		<input type="checkbox"/> Reappointment of Treasurer	
Name of Candidate LLOYD G HYATT		1. Address (include post office box or street, city, state, zip code) 134 CORAL WAY JACKSONVILLE BEACH, FL 32250	
Telephone (optional) (904) 247-0324	2. Party (Partisan candidates only) N/A	3. Office (add district, circuit, group number) CITY COUNCIL SEAT #3	
I have appointed the following person to act as my			
		<input checked="" type="checkbox"/> Campaign Treasurer	
		<input type="checkbox"/> Deputy Treasurer	
4. Name of Treasurer or Deputy Treasurer Linda Steinmann			
5. Mailing Address (If post office box or drawer add street address) 3855 Tropical Terr.			6. Telephone 904 249-5944
7. City Jax Beach	8. County Duval	9. State FL	10. Zip Code 32250
I have designated the following named bank as my			
		<input type="checkbox"/> Primary Depository	
		<input type="checkbox"/> Secondary Depository	
11. Name of Bank WELLS FARGO		12. Street Address	
13. City JACKSONVILLE BEACH	14. County DUVAL	15. State FLA	16. Zip Code
17. Signature of Candidate X Lloyd G Hyatt			Date 5/22/2012
<b>Campaign Treasurer's Acceptance of Appointment</b>			
I, <u>Linda Steinmann</u> , do hereby accept the appointment as (Please Print or Type)			
<input checked="" type="checkbox"/> Campaign Treasurer		<input type="checkbox"/> Deputy Treasurer	
for the campaign of <u>Lloyd G. Hyatt</u>			
who is seeking nomination or election as a _____ candidate to the office of (Party)			
<u>CITY COUNCIL SEAT #3</u>			
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.			
<u>5/22/12</u> Date		X <u>Linda Steinmann</u> Signature of Campaign Treasurer or Deputy Treasurer	

**CITY OF JACKSONVILLE BEACH - 2012**

STATE OF FLORIDA <b>APPOINTMENT OF CAMPAIGN TREASURER                  AND DESIGNATION OF CAMPAIGN                  DEPOSITORY FOR CANDIDATES</b> (Section 106.021(1), F.S.)  (PLEASE TYPE)				OFFICE USE ONLY <div style="border: 2px solid black; padding: 10px; margin: 5px auto; width: fit-content;"> <b>RECEIVED</b>                       MAY 22 2012                       City Clerk                 </div>			
CHECK APPROPRIATE BOX:							
<input checked="" type="checkbox"/> Original Appointment		<input checked="" type="checkbox"/> Deputy Treasurer		<input type="checkbox"/> Reappointment of Treasurer			
Name of Candidate <b>LLOYD G. HYATT</b>			1. Address (include post office box or street, city, state, zip code) <b>134 CORAL WAY                  JACKSONVILLE BEACH, FL 32250</b>				
Telephone (optional) <b>904 247 0324</b>		2. Party (Partisan candidates only) <b>N/A</b>		3. Office (add district, circuit, group number) <b>CITY COUNCIL SEAT # 3</b>			
I have appointed the following person to act as my				<input checked="" type="checkbox"/> Campaign Treasurer		<input type="checkbox"/> Deputy Treasurer	
4. Name of Treasurer or Deputy Treasurer <b>LLOYD G HYATT</b>							
5. Mailing Address (If post office box or drawer add street address) <b>134 CORAL WAY</b>				6. Telephone <b>904 247 0324</b>			
7. City <b>JAX BCH</b>		8. County <b>DUVAL</b>		9. State <b>FL</b>		10. Zip Code <b>32250</b>	
I have designated the following named bank as my				<input checked="" type="checkbox"/> Primary Depository		<input type="checkbox"/> Secondary Depository	
11. Name of Bank <b>WELLS FARGO</b>			12. Street Address				
13. City <b>JAX BCH</b>		14. County <b>DUVAL</b>		15. State <b>FL</b>		16. Zip Code <b>32250</b>	
17. Signature of Candidate X 					Date <b>3/11/2012</b>		
<b>Campaign Treasurer's Acceptance of Appointment</b>							
I, <u><b>LLOYD G HYATT</b></u> , do hereby accept the appointment as (Please Print or Type)							
<input checked="" type="checkbox"/> Campaign Treasurer		<input checked="" type="checkbox"/> Deputy Treasurer		for the campaign of <u><b>LLOYD G HYATT</b></u>			
who is seeking nomination or election as a <u><b>N/A</b></u> candidate to the office of (Party)							
<u><b>CITY COUNCIL SEAT # 3</b></u>							
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.							
Date <u><b>3/11/2012</b></u>				Signature of Campaign Treasurer or Deputy Treasurer X 			

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)  
(Please print or type)

OFFICE USE ONLY

**RECEIVED**

MAY 22 2012

City Clerk

I, LLOYD G. HYATT,

candidate for the office of City of Jacksonville Beach CITY COUNCIL ~~SEA~~ #3,

have been provided access to read and understand the requirements of  
Chapter 106, Florida Statutes.

x   
Signature of Candidate

3/11/2012  
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).

**City of Jacksonville Beach, Florida  
2012 Municipal Election**



**Self-Loan**

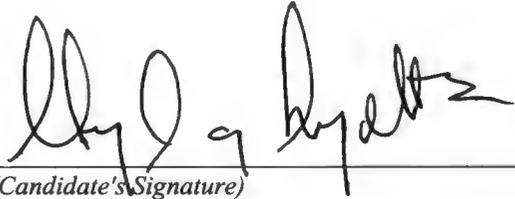
Date: 3/11/2012

**TO WHOM IT MAY CONCERN:**

I plan to loan myself money during my campaign in the 2012 Municipal Election for the City of Jacksonville Beach Office of:

Mayor

City Council, Seat # 3, At-Large

  
\_\_\_\_\_  
(Candidate's Signature)

LLOYD G HYATT  
\_\_\_\_\_  
(Name - Please Print)

OFFICE USE ONLY

**RECEIVED**

**MAY 22 2012**

**City Clerk**

## RESIDENCY AFFIDAVIT

STATE OF FLORIDA )  
COUNTY OF DUVAL )  
CITY OF JACKSONVILLE BEACH, FLORIDA) ss.

Before me, the undersigned authority, authorized to take oaths, personally appeared

LLOYD G HYATT

(Name of Candidate – Please Print)

who being by me first duly sworn, deposes and says that they are a registered elector of the City of Jacksonville Beach, Florida; and have resided within the limits of the City of Jacksonville Beach, Florida, for a period of six (6) months preceding the election and have been a **bona fide resident** for a **period of at least six (6) months prior to qualifying**; and that they are otherwise qualified to vote as defined by the Constitution and Statutes of the State of Florida in the Municipal Election to be held August 14, 2012 and/or November 6, 2012, in the City of Jacksonville Beach, Florida.

Address of Candidate: 134 CORAL WAY  
JACKSONVILLE BEACH, FL 32250

[Handwritten Signature]  
(Signature of Candidate)

STATE OF FLORIDA  
COUNTY OF DUVAL

Sworn to, and subscribed before me, this 5th day of June, A.D. 2012.

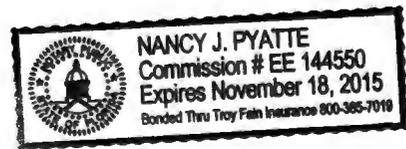
[Handwritten Signature]  
Signature NOTARY PUBLIC

NANCY J PYATTE  
(Printed Name)

Personally Known:  or

Produced Identification: \_\_\_\_\_

Type of Identification Produced:  
\_\_\_\_\_



City of  
Jacksonville Beach  
City Hall  
11 North Third Street  
Jacksonville Beach  
FL 32250  
Phone: 904.247.6299  
904.247.6250  
Fax: 904.247.6256  
E-Mail: cityclerk@jaxbchfl.net  
www.jacksonvillebeach.org



**CANDIDATE OATH –  
NONPARTISAN OFFICE**

(Not for use by Judicial or  
School Board Candidates)



OFFICE USE ONLY

**OATH OF CANDIDATE**  
(Section 99.021, Florida Statutes)

I, LLOYD G HYATT

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT \* – NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of City of Jacksonville Beach, Council,

3 At-Large; I am a qualified elector of DUVAL County, Florida;  
Seat # (office)

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

x [Signature] 904 247-0324 JAXBEACHLWID@GMAIL.COM  
Signature of Candidate Telephone Number Email Address

134 CORAL WAY JAX BCH FL 32250  
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 103739420

\* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

LOID G HEI-AT

STATE OF FLORIDA  
COUNTY OF DUVAL

Sworn to (or affirmed) and subscribed before me this 5TH day of JUNE, 2012.

Personally Known:  or  
Produced Identification: \_\_\_\_\_  
Type of Identification Produced: \_\_\_\_\_

[Signature]  
Signature of Notary Public  
Print, Type, or Stamp Commissioned Name of Notary Public  
NANCY J. PYATTE  
Commission # EE 144550  
Expires November 18, 2015  
Troy Fain Insurance 800-385-7019