



2024 ELECTION CANDIDATES

OFFICE OF THE MAYOR
CITY COUNCIL SEAT 2
CITY COUNCIL SEAT 3
CITY COUNCIL SEAT 5

PRIMARY/GENERAL ELECTION INFORMATION

For further information, contact:

Terese M. Jones, City Clerk
Terri Lefler, Deputy City Clerk
120 Malabar Road, SE
Palm Bay, FL 32907
Phone (321) 952-3414
Fax (321) 953-8971
Email: terese.jones@pbfl.org
terri.lefler@pbfl.org

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

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the filing officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last):
(Please Print or Type Name)

PETER J. FILIBERTO

3. Address (include PO Box or Street, City, State, Zip Code):

2263 SPRING CREEK CIRCLE
PALM BAY, FL 32905

4. Telephone:

(321) 508 0071

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

PETERFILIBERTO@GMAIL.COM

7. Office Sought (include district, circuit, group, or seat #):

PALM BAY CITY COUNCIL SEAT 3

8. If a candidate for a nonpartisan office, check the box if applicable:

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. _____ Party candidate.

10. I have appointed the following person to act as my:

Campaign Treasurer

Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

PETER FILIBERTO

12. Telephone:

(321) 508 0071

13. Email Address:

PETERFILIBERTO@GMAIL.COM

14. Mailing Address:

2263 SPRING CREEK CIRCLE

15. City:

PALM BAY

16. State:

FL

17. Zip Code:

32905

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

PNC BANK

20. Address:

5295 BABCOCK ST NE

21. City:

PALM BAY

22. County:

BREVARD

23. State:

FL

24. Zip Code:

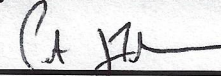
32905

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

05/29/2024

26. Signature of Candidate:

X 

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

I, Peter Filiberto do hereby accept the appointment designated above as:

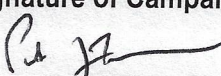
Campaign Treasurer.

Deputy Treasurer.

28. Date:

05/29/2024

29. Signature of Campaign Treasurer or Deputy Treasurer

X 

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

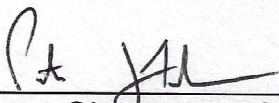
OFFICE USE ONLY

I, PETER FILIBERTO,

candidate for the office of PALM BEACH CITY COUNCIL SEAT 3;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X 
Signature of Candidate

05/29/2020
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 Palm Bay, Florida

RESIDENCY OF CANDIDATE AFFIDAVIT

I, Peter Filiberto, a candidate for the Office of City Council (check one);

- Mayor
- City Council Seat 2
- City Council Seat 3
- City Council Seat 4
- City Council Seat 5

do hereby solemnly swear or affirm:

- 1) I have been a resident of the City of Palm Bay for at least two (2) years immediately preceding the election date.
- 2) I am a registered voter of the City of Palm Bay, residing at a City address.
- 3) Have you ever been convicted of a felony? Yes No
- If 'yes', have your civil rights been restored? Yes No

UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS STATED IN IT ARE TRUE.

05/29/2024 Peter Filiberto
Date Signature of Candidate

Address: 2263 Spring Creek Circle

City: Palm Bay State: FL Zip Code: 32905

How do you prefer your name to be displayed on the City's and Brevard County's Supervisor of Elections websites? (This can differ from how it will be displayed on the ballot)

Peter J. Filiberto



REGISTRATION POLITICAL AND CAMPAIGN SIGNS

Name of Candidate: PETER B. FILIBERTO

Position Sought: PALM BAY CITY COUNCIL

Referendum:

Contact Person: PETER FILIBERTO

Address: 2263 SPRING CREEK CIRCLE

City: Palm Bay State: FL Zip Code: 32908

Business Phone Number: Home Phone Number: 321 5086021

E-mail: PETERFIL @ GMAIL.COM FAX Number:

Election Date:

Return to the Office of the City Clerk using one of the following methods:

By Mail: 120 Malabar Road, SE • Palm Bay, FL 32907

By FAX: 321-953-8971 or

Click **SUBMIT FORM** to send the information electronically

SUBMIT FORM



CANDIDATE BIOGRAPHICAL DATA

City Council Position (select one): Mayor Seat 2 Seat 3
Seat 4 Seat 5

1. Full Name:

Address:

City: State: Zip Code:

Contact Information:

Home/Mobile:

Business:

E-Mail:

2. Date of Birth (optional):

3. Education:

4. Present Employment:

Company:

Address:

5. Occupation:

Job Responsibilities:

If retired, what was your occupation prior to retirement?

Job Responsibilities:

6. Resident: Years Months

7. Are you a member or participant of any community organizations? (Please list)

8. Why do you want to be a member of the City Council?