



“No candidate for the Tallahassee City Commission shall accept any election campaign contribution from any contributor, including a political committee as defined by state law, in cash or in kind in an amount in excess of \$250.00 per election.”

**INDEPENDENT ETHICS BOARD
CAMPAIGN CONTRIBUTION REFUND CLAIM FORM
2016 ELECTION CYCLE**

Complete this form to claim a refund of contributions made between January 1, 2016 and November 8, 2016, to candidates for Mayor and City Commission of the City of Tallahassee. **Include an official campaign receipt for all contributions made between January 1, 2016 and November 8, 2016.**

Your first name and middle initial	Last name	Voter Registration No.
Residence address (street, apartment, route)		Date of birth
City	State	Zip code
Number of Receipts attached		
E-mail address:		

You may file only one claim form per election cycle.

1. Add all the contributions made between January 1, 2016 and November 8, 2016, shown on official campaign receipts attached to this application and enter the total..... **1** _____
2. Enter the amount from line 1 or \$25, **whichever is less.**
This is the amount of the refund you may be eligible to receive..... **2** _____

I hereby certify that I have made the contribution(s) identified in line 1 above, that I have not received another refund in connection with the identified contribution(s), and that I am a registered elector of the City of Tallahassee. Under penalties of perjury, I declare that I have read the foregoing, and I contributed as stated on this form to the best of my knowledge and belief.

_____ Date

_____ Signature*

*** Filing of a Campaign Contribution Refund Claim Form containing materially false information is an ethics offense subject to penalties established by the City Commission.**

Mail, hand-deliver or e-mail this claim form & receipt no later than January 15, 2017 to:

Independent Ethics Board
300 South Adams Street, A-25
Tallahassee, Florida 32301
electionsrefunds@talgov.com

FOR ETHICS BOARD USE ONLY

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Verified – Registered elector status |
| <input type="checkbox"/> | Verified – Contribution receipts provided to support refund. |
| <input type="checkbox"/> | Verified – No prior refund issued for the identified contribution(s). |
| <input type="checkbox"/> | Verified – No prior refund issued to the requesting individual for this cycle. |