

agency. Your signature can be viewed but not copied. (Section 97.0686, Fla. Stat.)

Registered elector. It is optional to see your face or identify. Boxes: Please check boxes () where applicable.

This is: ☒ New Registration ☐ Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) ☐ Request to Replace Voter Information Card

1 Are you a citizen of the United States of America? ☒ YES ☐ NO

2 ☐ I affirm I have never been convicted of a felony.
☐ If I have been convicted of a felony, I affirm my voting rights have been restored by the Board of Executive Clemency.
☒ If I have been convicted of a felony, I affirm my voting rights have been restored pursuant to s. 4, Art. VI of the State Constitution upon the completion of all terms of my sentence, including parole or probation.

3 ☐ I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.

4 Date of Birth (mm-dd-yyyy) 10-10-1956

5 Florida Driver License (FL DL) or Florida Identification (FL ID) Card Number [REDACTED] If no FL DL or FL ID, then provide Last 4 digits of Social Security Number [REDACTED] ☐ I have NONE of these numbers.

6 Last Name SUGGS First Name Eugene Middle Name [REDACTED] Name Suffix (Jr., Sr., I, II, etc.) [REDACTED]

7 Address Where I Live (Legal residence - to P.O. Box) 3650 NW 1st Ct Apt/Lot/Unit City Lauderhill County Broward State or Country Zip Code 33311

8 Mailing Address (if different from above address) [REDACTED] Apt/Lot/Unit City [REDACTED] State or Country [REDACTED] Zip Code [REDACTED]

9 Address Where You Were Last Registered to Vote [REDACTED] Apt/Lot/Unit City [REDACTED] State [REDACTED] Zip Code [REDACTED]

10 Former Name (if name is changed) [REDACTED] Gender ☒ M ☐ F State or Country of Birth Georgia Telephone No. (optional) [REDACTED]

11 ☐ Email me SAMPLE BALLOTS if option is available in my county. (See Public Record Notice above) My email address is: [REDACTED]

Party Affiliation (Check only one. If left blank, you will be registered without party affiliation)
☒ Florida Democratic Party
☐ Republican Party of Florida
☐ No party affiliation
☐ Minor party (print party name): [REDACTED]

Race/Ethnicity (Check only one)
☐ American Indian/Alaskan Native
☐ Asian/Pacific Islander
☒ Black, not of Hispanic Origin
☐ Hispanic
☐ White, not of Hispanic Origin
☐ Multi-racial
☐ Other: [REDACTED]

(Check only one if applicable)
☐ I am an active duty Uniformed Services or Merchant Marine member
☐ I am a spouse or a dependent of an active duty uniformed services or merchant marine member
☐ I am a U.S. citizen residing outside the U.S.

☐ I will need assistance with voting.
☐ I am interested in becoming a poll worker.

12 I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as an elector under the Constitution and laws of the State of Florida, and that all information provided in this application is true.

SIGN/MARK HERE [REDACTED]

Date 3/10/20



Show Signature



Date Image Scanned
03/10/2020



Show Signature



Date Image Scanned
03/10/2020

GN/
RK
RE
→



aint Doc Images Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

BRO Suggs JR, Eugene H

3650 NW 1St Ct, Lauderhill, 33311

Last Voter Activity Date	Nov/03/2020	pre-FVRS Regn Number	
Date Last Voted	Nov/03/2020	Registration Code	2
Date of Last Status Change	Mar/02/2022	Date Last Voter Card Printed	Jun/08/2020
Record Creation Date		Number of Times Voted	
Registration Date	May/26/2020		

Last Transaction Date	Operator

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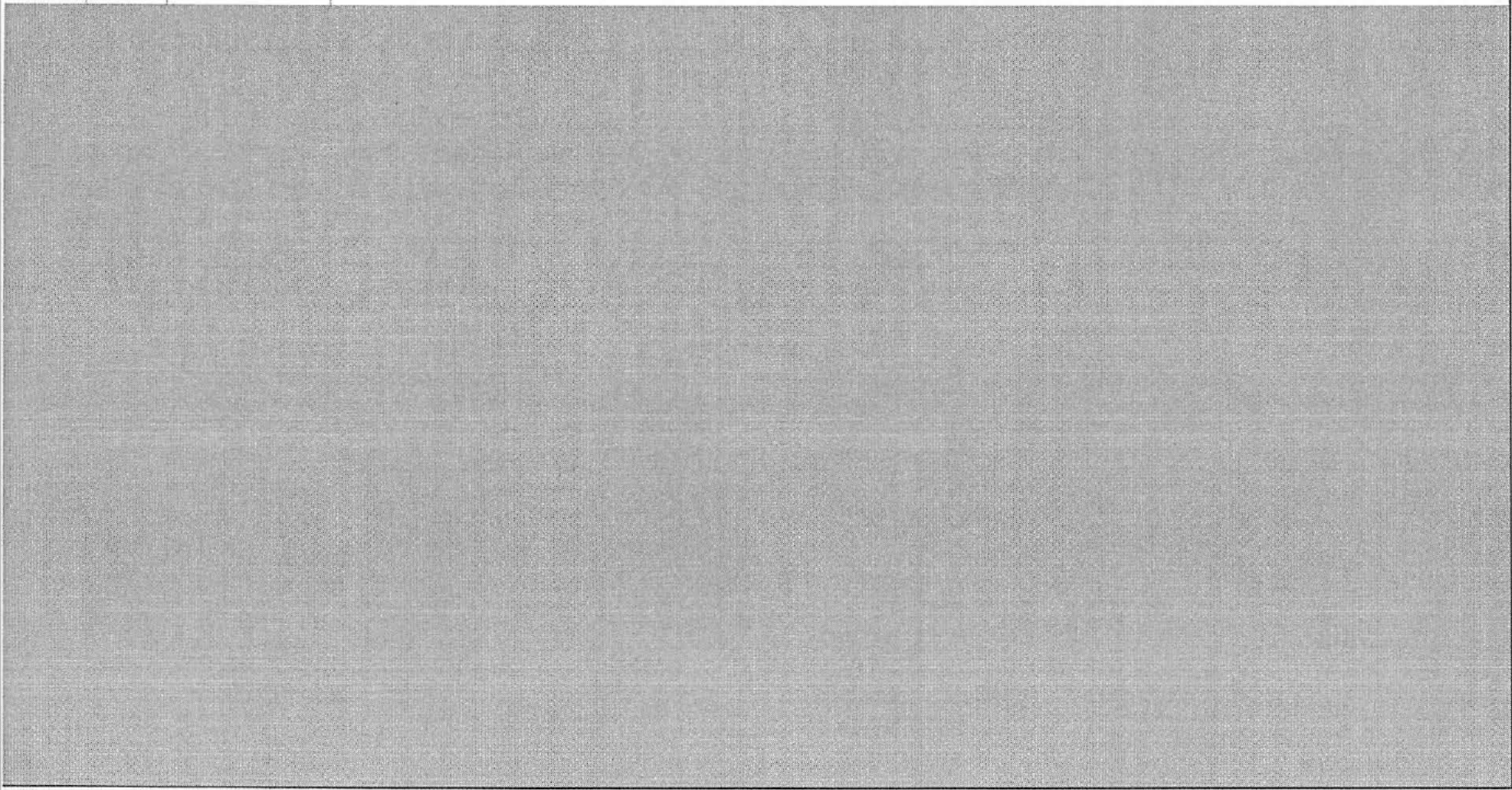
Eligibility Maint

BRO

Suggs JR, Eugene H

3650 NW 1St Ct, Lauderhill, 33311

Elec#	Date	Name	Status/History
10866	11/3/2020	2020 General Election	Voted Early
10865	8/18/2020	2020 Primary Election	Voted



Preview Sample
Ballot

Record Detail

Printer Friendly

DLID: [REDACTED]	SSN: [REDACTED]	VALID
Class: E		
Previous DL: 0	Previous DWLS: 1	

Address: [REDACTED] 33311		Date of Birth: [REDACTED]	Gender: [REDACTED]	Height: [REDACTED]
Original License Issue Date: [REDACTED]	Issued: [REDACTED]	Expires: [REDACTED]	Replaced: [REDACTED]	
CDL Status: [REDACTED]		Form Number: [REDACTED]		
Form Number: [REDACTED]		FIN: [REDACTED]		
Citizen Status: [REDACTED]	Country of Birth: [REDACTED]	State of Birth: [REDACTED]		
Race: [REDACTED]				

SAFE DRIVER
REAL ID COMPLIANT

Restrictions:	Endorsements:	Conditional Messages:
---------------	---------------	-----------------------

Vehicles DL Transactions **Addresses** Parking Permits

Printer Friendly

Current Address

Address	County	Address Type	Change Date
[REDACTED] 33311	[REDACTED]	DL - RESIDENTIAL	05/29/2015
[REDACTED] 33311	[REDACTED]	DL - MAILING	05/29/2015
[REDACTED] 33311	[REDACTED]	MV - RESIDENTIAL	05/29/2015
[REDACTED] 33311	[REDACTED]	MV - MAILING	05/29/2015

Address History

Driver License Addresses on File

Address	County	Address Type	Change Date
[REDACTED] 33311	[REDACTED]	MAILING	10/25/2012
[REDACTED] 33311	[REDACTED]	RESIDENTIAL	10/25/2012
[REDACTED] 33161-0000	[REDACTED]	MAILING	06/24/2004
[REDACTED] 33161-0000	[REDACTED]	RESIDENTIAL	06/24/2004
[REDACTED] 3161	[REDACTED]	MAILING	06/24/2004
[REDACTED] 33311	[REDACTED]	MAILING	05/25/2004
[REDACTED] 33311	[REDACTED]	MAILING	02/01/1899

Motor Vehicle Addresses on File

Address	County	Address Type	Change Date
[REDACTED] 33311	[REDACTED]	MAILING	
[REDACTED] 33311	[REDACTED]	MAILING	02/07/2018
[REDACTED] 33311	[REDACTED]	RESIDENTIAL	02/07/2018
[REDACTED] 33311	[REDACTED]	MAILING	05/29/2015
[REDACTED] 33311	[REDACTED]	RESIDENTIAL	05/29/2015
[REDACTED] 33311	[REDACTED]	MAILING	10/25/2012
[REDACTED] 33311	[REDACTED]	RESIDENTIAL	10/25/2012

Photo and Signature Array

Digital images are restricted for use pursuant to S.322.142(4), Florida Statutes - images include photographs and signatures.

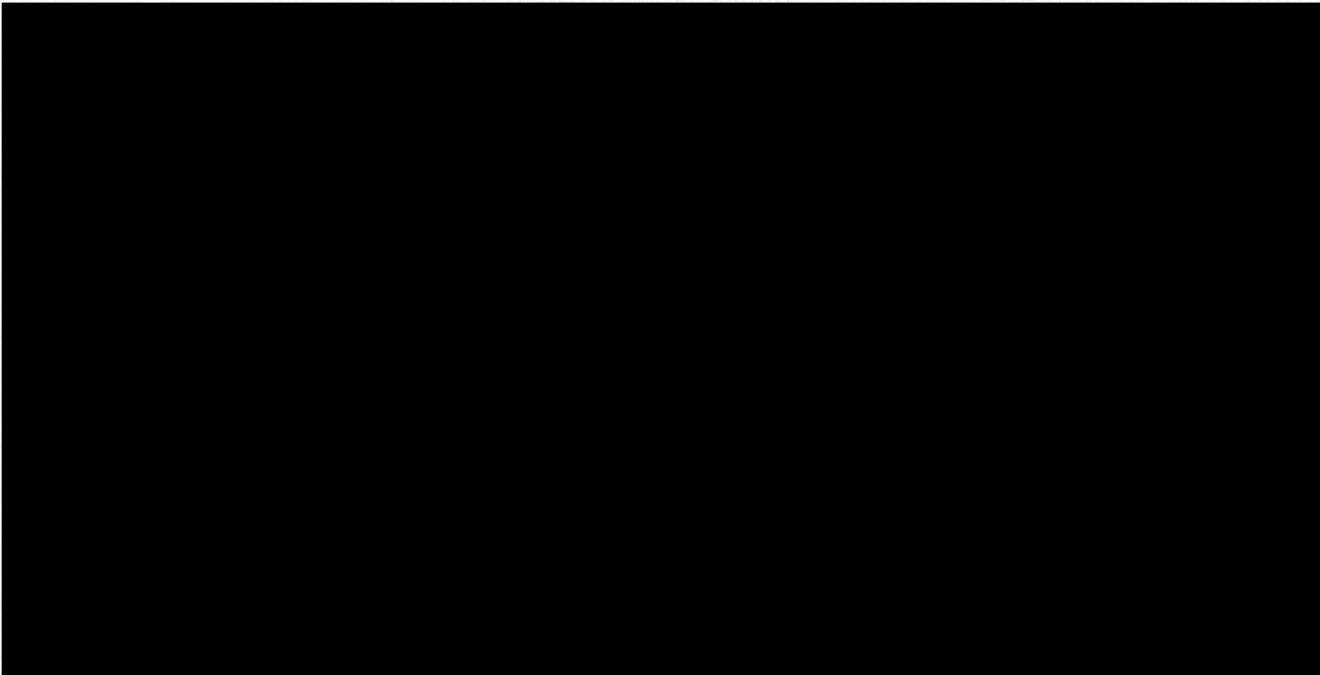
Birth Date:

DL/ID:

Race/Sex:

Photo Array

Printer Friendly Photo Only



Signatures

Printer Friendly Signature Only

	Image	License No	Name	Transaction Date	Void	
view	1			07/26/2021	NO	
view	2			02/07/2018	NO	
view	3			05/29/2015	NO	
view	4			10/25/2012	NO	
view	5			06/24/2004	NO	
view	6			05/25/2004	NO	

COMPREHENSIVE CASE INFORMATION SYSTEM

Brenda D. Forman, Clerk of the Circuit and County Court
BROWARD COUNTY


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kalen.mercer@dos.myflorida.com

[Back](#)
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Case Number	Filed Date	Disposition Date	County	Case Type	Status	Contested
061993CF010611A88810 [93-010611-CF10A]	06/20/1993	05/01/1996	BROWARD	FELONY	DISPOSED	No

Charge Seq #	Description	Date	Phase	Trial
1	MURDER IN 2ND DEGREE	05/01/1996	Court:Adjudicated Guilty	No Trial

	Date	Action	Statute / Text
Offense:	06/18/1993	Trial: No Trial	
Initial:	06/19/1993	Charged	782.04(1)(A) / MURDER IN THE FIRST DEGREE
Prosecutor:	07/07/1993	Filed	782.04(1)(A) / MURDER IN THE FIRST DEGREE
Court:	05/01/1996	Adjudicated Guilty	782.04(3) / MURDER IN 2ND DEGREE

Party Name	Party Type	Attorney	Bar ID
FK, ANDREW L SIEGEL -	JUDGE		
STATE OF FLORIDA	STATE ATTORNEY		
SUGGS, EUGENE Search This Party	DEFENDANT		

DOB: 10/09/1956
Race: Black
License:
Address: 3650 NW 1 CT FT LAUD, FL

Place of Birth:
Gender: Male
Juvenile: No
Domestic Violence:

[+ Dockets](#)
[+ Judge Assignment History](#)
[+ Court Events](#)
[+ Sentences](#)
[- Financial Summary](#)

Financial Summary

Assessment	Total: \$343.15	Paid to Date: \$4.00	Balance Due: \$339.15
Restitution	Total: \$0.00	Paid to Date: \$0.00	Balance Due: \$0.00

Financial Details

Count	Assessment Due	Assessment Paid to Date	Restitution Due	Restitution Paid to Date	Last Payment Date
1	\$343.15	\$4.00	\$0.00	\$0.00	-

This information reflects the financial obligations shown on the Florida Comprehensive Case Information System (CCIS) for THIS CASE ONLY. For the current balances of your financial obligations, you should contact the Clerk of the Court in the county where the financial obligation was imposed. Nothing in CCIS alters any financial obligation imposed by a court.

[+ Reopen History](#)



Florida Department of Corrections

"Inspiring Success by Transforming One Life at a Time"



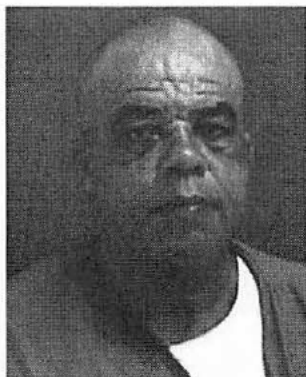
Ron DeSantis, Governor
Ricky D. Dixon, Secretary

[Offender Search](#) [Visit an Inmate](#) [Correctional Institutions](#) [Probation Services](#) [FDC Jobs](#) [Newsroom](#) [Statistics](#)

Corrections Offender Network

Inmate Release Information Detail

(This information was current as of 7/21/2015)



DC Number: 044003
Name: SUGGS, EUGENE
Race: BLACK
Sex: MALE
Birth Date: 10/09/1956
Custody: CLOSE
Release Date: 07/21/2015

Stated Residence Upon Release:

3650 NW 1ST. CT.
FT. LAUDERDALE, FL 3331133311

Aliases:

EUGENE SUGGS, EUGENE H SUGGS, EUGENE H SUGGS JR, EUGENE H. SUGGS, EUGENE HENRY SUGGS JR

Current Prison Sentence History:

Offense Date	Offense	Sentence Date	County	Case No.	Prison Sentence Length
06/18/1993	2ND DEG. MURD, DANGEROUS ACT	05/01/1996	BROWARD	9310611	22Y 0M 0D

Note: The offense descriptions are truncated and do not necessarily reflect the crime of conviction. Please refer to the court documents or the Florida Statutes for further information or definition.

Incarceration History:

Offense Date	Offense	Sentence Date	County	Case No.	Prison Sentence Length
12/10/1974		08/21/1979			
08/26/1986		01/21/1987			
07/23/1987		11/27/1990			
06/04/1996		05/19/2004			
11/02/2005		08/01/2012			
01/22/2013		07/21/2015			

Prior Prison History: (Note: Data reflected covers periods of incarceration with the Florida Dept of Corrections since January of 1983)

Offense Date	Offense	Sentence Date	County	Case No.	Prison Sentence Length
11/15/1974	ROBB. GUN OR DEADLY WPN	11/15/1974	BROWARD		20Y 0M 0D
05/06/1986	RESISTING OFFICER W/VIOLEN.	08/26/1986	BROWARD	8606224	1Y 0M 1D
05/04/1987	AGG BATTERY INTENDED HARM	07/21/1987	BROWARD	8708124	5Y 6M 0D
05/04/1987	SHOOT/THROW MISSILE-BLDG/VEH.	07/21/1987	BROWARD	8708124	5Y 6M 0D
05/04/1987	POSS. FIREARM BY FELON	07/21/1987	BROWARD	8708124	5Y 6M 0D

17th Judicial Circuit in and for Broward County

CLOCK IN

DIVISION:
CRIMINAL

JUDGEMENT

DIV: FD

96-259481 T#019
05-30-96 08:12AM

THE STATE OF FLORIDA VS:

Eugene Suggs

CASE NUMBER

93-10611CF

PLAINTIFF

DEFENDANT

[] PROBATION VIOLATOR
(Check if Applicable)STATE ATTORNEY
COURT REPORTERT. KERN
StaubachThe Defendant, Eugene Suggs being personally before this Court represented
by: L. Fishman his attorney of record, and having:
(Check Applicable Provision)

- [] Been tried and found guilty of the following crime(s).
☒ Entered a plea of guilty to the following crime(s).
☐ Entered a plea of nolo contendere to the following crime(s).

COUNT	CRIME	OFFENSE STATUTE NUMBER(S)	DEGREE OF CRIME	ADD'L MONIES IMPOSED
I	Murder 2 ^o w/ firearm	782.04(2) + 775.087	Life Fel.	

and no cause having been shown why the Defendant should not be adjudicated guilty, IT IS ORDERED THAT the Defendant is hereby ADJUDICATED GUILTY of the above crime(s).

The Defendant is hereby ordered to pay the sum of Fifty Dollars (\$50.00) pursuant to F.S. 960.20 (Crimes Comp. Trust Fund). The defendant is further ordered to pay the sum of Five Dollars (\$5.00) as court costs pursuant to F.S. 943.25(4).

- (Check if Applicable) [] The Defendant is further ordered to pay a fine in the sum of \$ _____ pursuant to F.S. 775.0835. (This provision refers to the optional fine for the Crimes Compensation Trust Fund, and is not applicable unless checked and completed. Fines imposed as part of a sentence pursuant to F.S. 775.083 are to be recorded on the Sentence page(s).)
- Restitution to State [] The defendant shall make payment of any debt due and owing to the State under section 960.17, 948.03 (1)(9) and 775.089, Florida Statutes. The amount of such debt shall not exceed \$10,000 and has already been determined to be \$ _____ or if not yet determined shall be determined by the Court at a later date upon final payment by the Crimes Compensation Trust Fund on behalf of the victim(s).
- [] The Court hereby imposed additional court costs in the sum of \$ _____
- Imposition of Sentence Stayed and Withheld [] The Court hereby stays and withholds the imposition of sentence as to count(s) _____ and places the Defendant on probation for a period of _____ under the supervision of the Department of Corrections (condition of probation set forth in separate order.)
- Sentence Deferred Until Later Date (Check if Applicable) [] The Court hereby defers imposition of sentence until _____ (Date)
- ☒ Pay \$200.00 Trust Fund pursuant to F.S. 27.3455

The Defendant in Open Court was advised of his right to appeal from this Judgment by filing notice of appeal with the Clerk of Court within thirty days following the date sentence is imposed or probation is ordered pursuant to this adjudication. The Defendant was also advised of his right to the assistance of counsel in taking said appeal at the expense of the State upon showing of indigence.

COUNT(S) _____ : _____ DAYS BROWARD COUNTY JAIL W/CREDIT FOR _____ DAYS TIMES SERVED

DIVISION
● CRIMINAL
() TRAFFIC
() OTHER

() ADJUDICATION WITHHELD
(X) ADJUDICATED GUILTY

CASE NUMBER

93-10611CF

FINGERPRINTS OF DEFENDANT

Fingerprints taken by:

Whitley A. Lewis 4512 Court Deputy
Name and Title

MAY 01 1996

DONE AND ORDERED in Open Court at Broward County, Florida this _____ day of _____

A.D. 19 96 . I HEREBY CERTIFY that the above and foregoing fingerprints are the fingerprints of the Defendant

EUGENE SUGGS and that they were placed thereon by said
Defendant in my presence in Open Court this date.

RECORDED IN THE OFFICIAL RECORDS BOOK
OF BROWARD COUNTY, FLORIDA
COUNTY ADMINISTRATOR

Paul L. Backman
PAUL L. BACKMAN JUDGE

BK25937PG0217

[] 17th Judicial Circuit In and for Broward County

CLOCK IN

DIVISION:
Criminal

as to Count I **SENTENCE**

THE STATE OF FLORIDA VS.

Eugene Suggs

PLAINTIFF

DEFENDANT

CASE NUMBER

93-10611CFA

The Defendant, being personally before this Court, accompanied by his attorney, L. Fishman and having been adjudicated guilty herein, and the Court having given the Defendant an opportunity to be heard and to offer matters in mitigation of sentence, and to show cause why he sentenced as provided by law, and cause shown,

- [] and the Court having on _____ deferred imposition of sentence until this date.
(Check One) [] and the Court having previously entered a judgment in this case on the defendant now re sentences the defendant.
[] and the Court having placed the Defendant on Probation/Community Control and having subsequently revoked the Defendant's Probation/Community Control.

IT IS THE SENTENCE OF THE COURT that:

The Defendant pay a fine of \$ _____, pursuant to F.S. 775.063, plus \$ _____ at the 5% surcharge required by F.S. 960.25

- ☒ The Defendant is hereby committed to the custody of the Department of Corrections.
[] The Defendant is hereby committed to the custody of the Sheriff of Broward County, Florida.
[] The Defendant is hereby sentenced as a youthful offender in accordance with F.S. 958.04.

TO BE IMPRISONED (check one: unmarked sections are inapplicable)

- [] For a term of Natural Life.
☒ For a term of 22 yrs
[] Said SENTENCE IS SUSPENDED for a period of _____ subject to conditions set forth in this Order.

If "split" sentence,
complete either
paragraph.

_____ Followed by a period of _____ on Probation/Community Control under the supervision of the Department of Correction according to the terms and conditions of supervision set forth in separate order entered herein.

_____ However, after serving a period of _____ imprisonment in _____ the balance of such sentence shall be suspended and the defendant shall be placed on Probation/Community Control for a period of _____ under supervision of the Department of Corrections according to the terms and conditions of Probation/Community Control set forth in a separate order entered herein.

DIVISION:
CRIMINAL

SENTENCE

CASE NUMBER

(AS TO COUNT I)

93-10611CFA

In the event the defendant is ordered to serve additional split sentences, all incarceration portions shall be satisfied before the defendant begins service of the supervision terms.

SPECIAL PROVISIONS

(As to Count I)

By appropriate notation, the following provisions apply to the sentence imposed:

MANDATORY/MINIMUM PROVISIONS:

FIREARM

✓ It is further ordered that the three year minimum imprisonment provision of Florida Statute 775.087(2) are hereby imposed for the sentence specified in this count.

DRUG TRAFFICKING

 It is further ordered that the mandatory minimum imprisonment provisions of Florida Statute 893.135(1) are hereby imposed for the sentence specified in this court.

CONTROLLED
SUBSTANCE WITHIN 1000
FEET OF SCHOOL

 It is further ordered that the three year minimum imprisonment provision of Florida Statute 893.13(1)(e) 1, are hereby imposed for the sentence specified in this court.

HABITUAL FELONY
OFFENDER

 The Defendant is adjudicated a habitual felony offender and has been sentenced to an extended term in this sentence in accordance to the provisions of Florida Statute 775.084(4). The requisite findings by the court are set forth in a separate order or stated on the record in open court.

HABITUAL VIOLENT
OFFENDER

 The Defendant is adjudicated a habitual violent felony offender and has been sentenced to an extended term in accordance with the provision of Florida Statute 775.084(4). A minimum term of year(s) must be served prior to release. The requisite findings by the court are set forth in a separate order or stated on the record in open court.

LAW ENFORCEMENT
PROTECTION ACT

 It is further ordered that the defendant shall serve a minimum of years before release in accordance with Florida Statute 775.0823.

CAPITAL OFFENSE

 It is further ordered that the Defendant shall serve no less than 25 years in accordance with the provisions of Florida Statute 775.082(1)

SHORT-BARRELED RIFLE,
SHOTGUN, MACHINE GUN

 It is further ordered that the five-year minimum provisions of Florida Statute 790.221(2) are hereby imposed for the sentence specified in this court.

CONTINUING CRIMINAL
ENTERPRISE

 It is further ordered that the 25 year mandatory minimum sentence provisions of Florida Statute 893.20 are hereby imposed for the sentence specified in this count.

Beth Decker

From: Strauss, Scott <Scott.Strauss@dos.myflorida.com>
Sent: Sunday, August 7, 2022 10:17 AM
To: Jeremy Scott
Cc: Nick Cox
Subject: Targets
Attachments: ecid00010.pdf; ecid00009.pdf; ecid00007.pdf; ecid00006.pdf; ecid00005.pdf

Jeremy,
As requested, see attached.

Scott

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Correspondence

Console

Help

Exit

aint Doc Images Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

BRO Mitchell, Dawane 2000 NW 1St Ter, Pompano Beach, 33060

Last		Style		First		Middle		Driver License		Source		Soc Sec Num		Source	
Mitchell		v		Dawane						F,Form v				F,Form v	
Nbr	Suf	Dir	Street Name			Type	Dir	Unit Type	Nbr	City Name		County	Zip Code		
2000		NW v	1St			Ter v	v			Pompano Beach		BROWARD	33060		

Mail

City

State

Zip Code

Country

Email Address

☐ Receive Sample Ballots by Email

Language Preference

None v

Sex	Race	Party	Pty Chg Req Dte	Regn Date	<input type="checkbox"/> See Comms	Reason(Status)
M v	3,Black, not Hispanic v	Npa, No Party Affiliation v	/ /	01/23/2020		E(P) Civil Rights Felon v

Date of Birth	Birth Place	Telephone	Ext
01/13/1978	Florida	(954)658-3965	

<input type="checkbox"/> Assistance?	<input type="checkbox"/> EW Interest?
<input type="checkbox"/> Addr Protect?	<input type="checkbox"/> Fed Elections Only
<input type="checkbox"/> ID Required to Vote	<input type="checkbox"/> Photo Id Seen

Photo ID Type

Photo Name/Addr

Prior Address

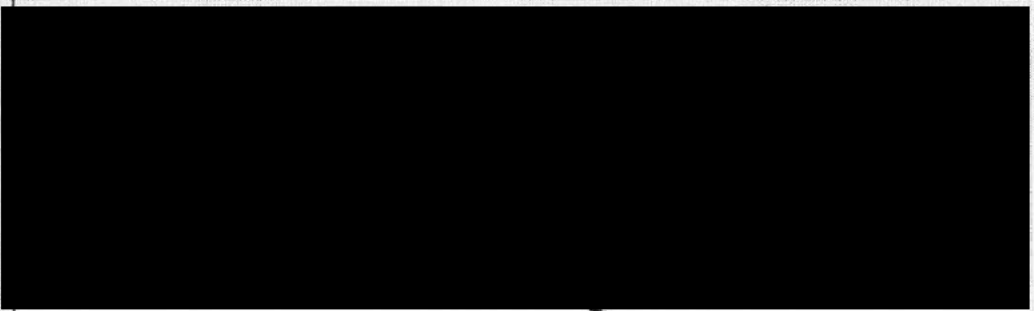
Kota Address

Printing

Voter Response

Districts

Precinct	Cng	Sen	Hse	CC	SB
C006.0	20	33	92	2	7



Registration Agency: Your signature can be copied. (Section 97.002, Fla. Stat.)

Race/Ethnicity: It is optional to list your race or ethnicity. Boxes: Please check boxes (X) where applicable.

Numbered rows 1 through 7 and 12 must be completed for a new registration.

Florida Voter Registration Application
Form (DS-06) (Rev. 11/16/2014) (F.A.C. 11.001)

The downloadable/printable online form is available at: www.elections.state.fl.us

This is: ☒ New Registration ☐ Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) ☐ Request to Replace Voter Information Card

1 Are you a citizen of the United States of America? ☒ YES ☐ NO

2 ☒ I affirm that I am not a convicted felon, or if I am, my right to vote has been restored.

3 ☒ I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.

4 Date of Birth (mm-dd-yyyy) 01-13-1978

5 Florida Driver License (FL DL) or Florida Identification (FL ID) Card Number

6 Last Name Mitchell First Name Dawane Middle Name

7 Address Where You Live (legal residence-no P.O. Box) 2000 NW 1st Terrace Apt/Lot/Unit City Pompano Beach County Broward Zip Code 33060

8 Mailing Address (if different from above address) Apt/Lot/Unit City State or Country Zip Code

9 Address Where You Were Last Registered to Vote Apt/Lot/Unit City State Zip Code

10 Former Name (if name is changed) Gender M F State or Country of Birth Florida Telephone No. (optional) 754 658 3965

11 ☐ Email me SAMPLE BALLOTS if option is available in my county. (See Public Record Notice above) My email address is:

Party Affiliation (Check only one. If left blank, you will be registered without party affiliation.)
☐ Florida Democratic Party
☐ Republican Party of Florida
☒ No party affiliation
☐ Minor party (print party name):

Race/Ethnicity (Check only one)
☐ American Indian/Alaskan Native
☐ Asian/Pacific Islander
☒ Black, not of Hispanic Origin
☐ Hispanic
☐ White, not of Hispanic Origin
☐ Multi-racial
☐ Other:

(Check only one if applicable)
☐ I am an active duty Uniformed Services or Merchant Marine member
☐ I am a spouse or a dependent of an active duty uniformed services or merchant marine member
☐ I am a U.S. citizen residing outside the U.S.

☐ I will need assistance with voting.
☐ I am interested in becoming a poll worker.

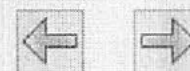
12 Oath: I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as an elector under the Constitution and laws of the State of Florida, and that all information provided in this application is true.

SIGN MARK HERE

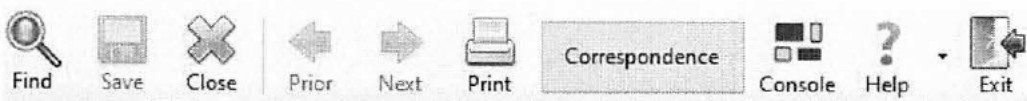
Date 01/20/2020



Show Signature



Date Image Scanned
02/12/2020



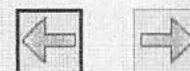
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BRO Mitchell, Dawane

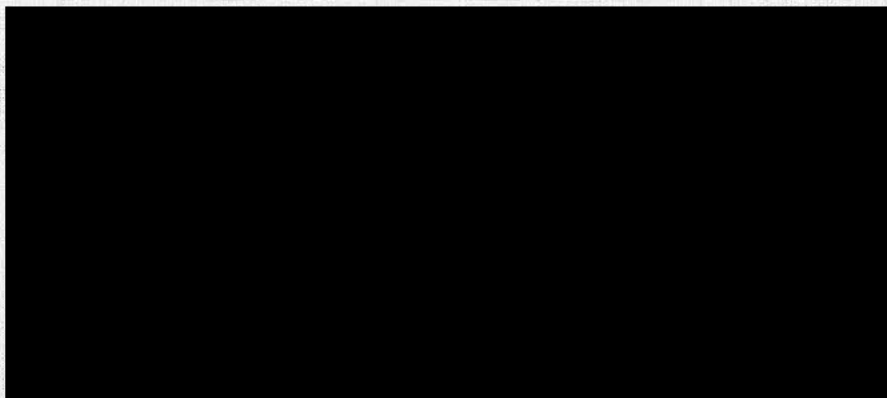
2000 NW 1St Ter, Pompano Beach, 33060



Show Signature



Date Image Scanned
02/12/2020




BRO


Mitchell, Dawane


2000 NW 1St Ter, Pompano Beach, 33060


Last Voter Activity Date	Nov/03/2020	pre-FVRS Regn Number	
Date Last Voted	Nov/03/2020	Registration Code	8
Date of Last Status Change	Feb/11/2022	Date Last Voter Card Printed	Jan/31/2020
Record Creation Date		Number of Times Voted	
Registration Date	Jan/23/2020		


Last Transaction Date	Operator


Find

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Console

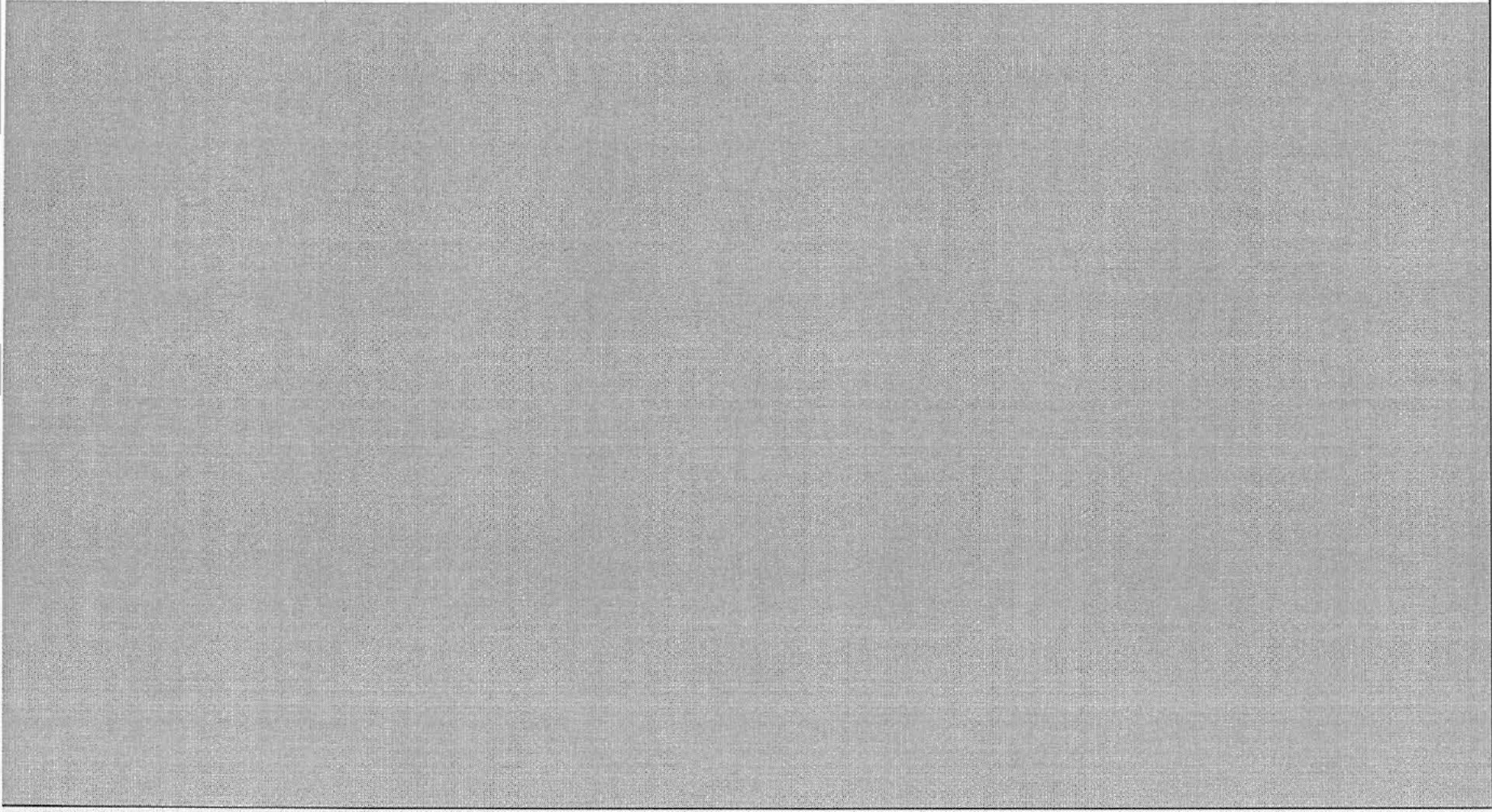
Help

Exit


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BRO Mitchell, Dawane 2000 NW 1st Ter, Pompano Beach, 33060


Elec#	Date	Name	Status/History
10866	11/3/2020	2020 General Election	Voted





Preview Sample
Ballot


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BRO


Mitchell, Dawane


2000 NW 1St Ter, Pompano Beach, 33060


Date	Cnty	Operator	Field	New Value	Old Value
2/11/2022 8:37 AM	BRO	scahuasqui	Status	REM	ACT
2/11/2022 8:37 AM	BRO	scahuasqui	StatusReason	E	1
10/14/2020 10:53 AM	BRO	SAxelrod	Absentee	P	


Retrieve Fvrs
Notification History


Retrieve Fvrs Txn
Audit


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BRO


Mitchell, Dawane


2000 NW 1St Ter, Pompano Beach, 33060


Default Ballot Address	Precinct	Party	Vote-by-Mail Status	Comment
Default Address Not Avail for Non_county	C006	Npa	P Permanent	
Military <input type="checkbox"/>	Mil Dep <input type="checkbox"/>	Email	Date of Birth 01/13/1978	


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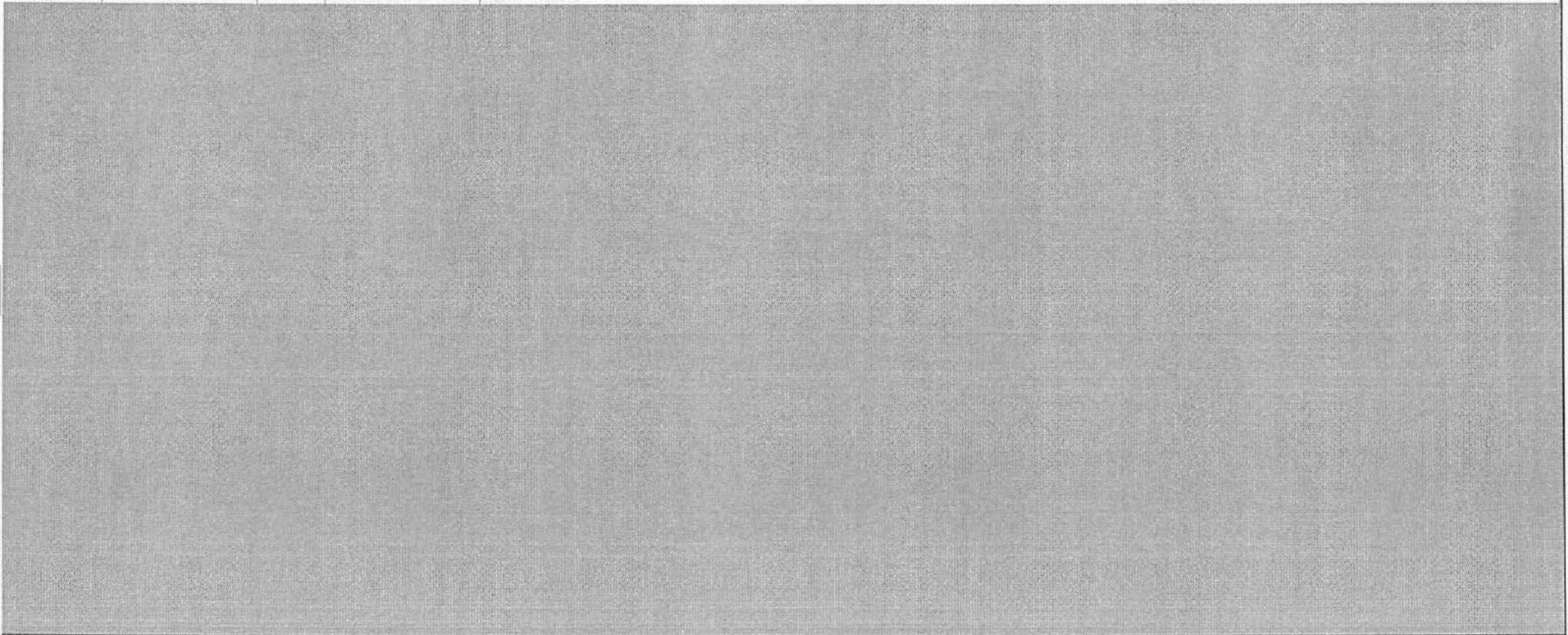
 Exit

aint DocImages Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

BRO Mitchell, Dawane

2000 NW 1st Ter, Pompano Beach, 33060

#	Date	VO	Operator	Type
1195470764	2/11/2022 12:00 AM	O	BROWARD/brofab5	REMOVALNTC
1185836487	1/6/2022 12:00 AM	O	BROWARD/brofab5	Felon Letter
995979540	1/31/2020 12:00 AM	O	BROWARD/brofab5	Voter ID Card



Legend

Undeliverable Mail Sent

Image Attached

Undeliverable Mail Returned

Record Detail

Print Privacy

DLID: [REDACTED] SSN: [REDACTED]
Class: E
Previous DLID: 0
Previous DWLS: 0

VALID -
PENDING
SUSPENSION
ON 08/08/2022
Chargeable Under 322.34
(10)(a)

[Driver History](#) [Photo & Signature](#)

Address:	Date of Birth:	Gender:	Height:
[REDACTED] 33060	[REDACTED]	[REDACTED]	[REDACTED]
Original License Issue Date:	Issued:	Expires:	Replaced:
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
CDL Status:	[REDACTED]		
Non Eligible	[REDACTED]		
Form Number:	EIN:		
[REDACTED]	[REDACTED]		
Citizen Status:	Country of Birth:	State of Birth:	
[REDACTED]	[REDACTED]	[REDACTED]	
Race:	[REDACTED]		
[REDACTED]	[REDACTED]		
Restrictions:	Endorsements:	Conditional Messages:	
[REDACTED]	[REDACTED]	[REDACTED]	

Sexual Offender
SAFE DRIVER
REAL ID COMPLIANT

[Vehicles](#) [DL Transactions](#) [Addresses](#) [Pending Permits](#)

Print Privacy

Current Address

Address	County	Address Type	Change Date
[REDACTED] 33060	[REDACTED]	DL - RESIDENTIAL	01/05/2021
[REDACTED] 33060	[REDACTED]	DL - MAILING	01/30/2017
[REDACTED] 33060-0	[REDACTED]	MV - RESIDENTIAL	01/05/2021
[REDACTED] 33060	[REDACTED]	MV - MAILING	01/05/2021

Address History

Driver License Addresses on File

Address	County	Address Type	Change Date
[REDACTED] 33060	[REDACTED]	RESIDENTIAL	01/30/2017
[REDACTED] 33060	[REDACTED]	MAILING	10/05/2010
[REDACTED] 33312	[REDACTED]	MAILING	06/09/2009
[REDACTED] 33312	[REDACTED]	RESIDENTIAL	06/09/2009
[REDACTED] 33060	[REDACTED]	MAILING	02/23/2007
[REDACTED] 33060	[REDACTED]	RESIDENTIAL	02/23/2007
[REDACTED] 33127	[REDACTED]	MAILING	08/07/2006
[REDACTED] 33127	[REDACTED]	RESIDENTIAL	08/07/2006

Motor Vehicle Addresses on File

Address	County	Address Type	Change Date
[REDACTED] 33060	[REDACTED]	MAILING	01/30/2017
[REDACTED] 33060	[REDACTED]	MAILING	01/30/2017
[REDACTED] 33060	[REDACTED]	RESIDENTIAL	01/30/2017
[REDACTED] 33060	[REDACTED]	MAILING	09/10/2014
[REDACTED] 33060	[REDACTED]	RESIDENTIAL	09/10/2014
[REDACTED] 33060	[REDACTED]	MAILING	08/19/2014
[REDACTED] 33060	[REDACTED]	RESIDENTIAL	08/19/2014
[REDACTED] 33060	[REDACTED]	MAILING	03/12/2013
[REDACTED] 33060	[REDACTED]	RESIDENTIAL	03/12/2013
[REDACTED] 33060	[REDACTED]	MAILING	10/05/2010
[REDACTED] 33060	[REDACTED]	RESIDENTIAL	10/05/2010
[REDACTED] 33312	[REDACTED]	MAILING	06/09/2009
[REDACTED] 33312	[REDACTED]	RESIDENTIAL	06/09/2009

Photo and Signature Array

Digital images are restricted for use pursuant to S.322.142(4), Florida Statutes - images include photographs and signatures.

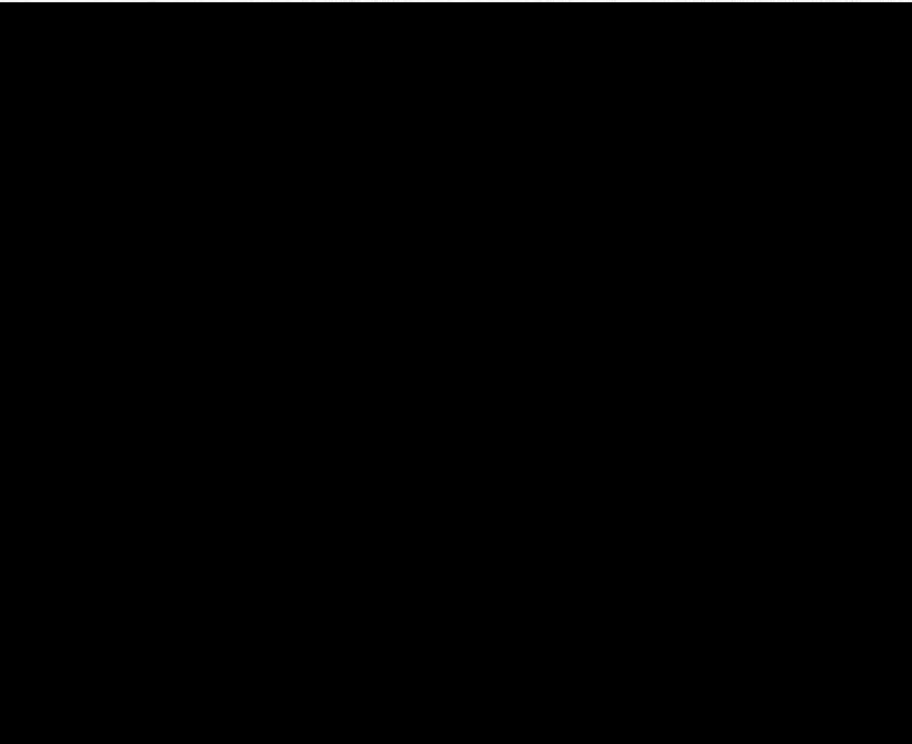
Birth Date:

DL/ID:

Race/Sex:

Photo Array

Printer Friendly Photo Only



Signatures

Printer Friendly Signature Only

	Image	License No	Name	Transaction Date	Void	
view	1			01/05/2021	NO	
view	2			03/12/2013	NO	
view	3			10/05/2010	NO	
view	4			06/09/2009	NO	
view	5			10/02/2007	NO	
view	6			10/02/2007	NO	
view	7			10/01/2007	NO	
view	8			02/23/2007	NO	
view	9			01/12/2007	NO	
view	10			01/12/2007	NO	
view	11			01/12/2007	NO	
view	12			08/07/2006	NO	

COMPREHENSIVE CASE INFORMATION SYSTEM

Harvey Ruvin, Clerk of the Circuit and County Courts
MIAMI-DADE COUNTY



"We are agents of change
and advocates of innovation.
We apply appropriate
strategic, technological,
process and people"



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kalen.mercer@dos.myflorida.com

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Case Number	Filed Date	Disposition Date	County	Case Type	Status	Contested
131993CF0267770001XX [F93026777]	08/10/1993	09/12/1995	MIAMI-DADE	FELONY	REOPENED	No

Charge Seq #	Description	Date	Phase	Trial
00001	BURGLARY/ARMED - PBL	09/15/1997	Court Adjudicated Guilty	Jury Trial
00002	SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY	09/15/1997	Court Adjudicated Guilty	Jury Trial
Date	Action	Statute / Text		
Offense: 07/27/1993	Trial: Jury Trial			
Initial: 07/27/1993	Charged			
Prosecutor: 08/10/1993	Filed	794.011(3) / SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY		
Court: 09/15/1997	Adjudicated Guilty	794.011(3) / SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY		
00003	SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY	09/15/1997	Court Adjudicated Guilty	Jury Trial
00004	ROBBERY/ARMED/WEAPON	09/15/1997	Court Adjudicated Guilty	Jury Trial

Party Name	Party Type	Attorney	Bar ID
HIRSCH, MILTON	JUDGE		
MISSET, LYNN M	DEFENDANT ATTORNEY		
POTH, JEFFREY	STATE ATTORNEY		
MITCHELL, DAYWANE G Search This Party	DEFENDANT	MISSET, LYNN A MALKOFF	396435
DOB: 01/13/1978		Place of Birth:	
Race: Black		Gender: Male	
License:		Juvenile: No	
Address: 532 SW 2ND ST APT: 5 POMPANO BEACH, FL, 330606826		Domestic Violence:	

+ Dockets

+ Judge Assignment History

+ Court Events

+ Sentences

- Financial Summary

Financial Summary

Assessment	Total: \$255.00	Paid to Date: \$0.00	Balance Due: \$255.00
Restitution	Total: \$0.00	Paid to Date: \$0.00	Balance Due: \$0.00

Financial Details

Count	Assessment Due	Assessment Paid to Date	Restitution Due	Restitution Paid to Date	Last Payment Date
	\$255.00	\$0.00	\$0.00	\$0.00	-

This information reflects the financial obligations shown on the Florida Comprehensive Case Information System (CCIS) for THIS CASE ONLY. For the current balances of your financial obligations, you should contact the Clerk of the Court in the county where the financial obligation was imposed. Nothing in CCIS alters any financial obligation imposed by a court.

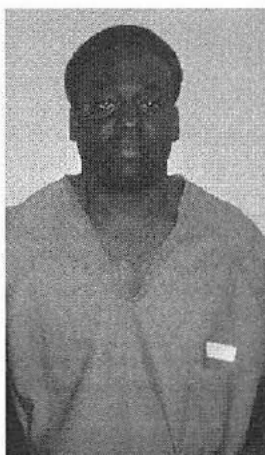
+ Reopen History



Corrections Offender Network

Inmate Release Information Detail

(This information was current as of 11/18/2005)



DC Number: 467531
 Name: MITCHELL, DAWANE G
 Race: BLACK
 Sex: MALE
 Birth Date: 01/13/1978
 Custody: CLOSE
 Release Date: 11/01/2005

Stated Residence Upon Release:

4907 N. W. 15TH AVENUE
 MIAMI, FLORIDA 33142

Aliases:

DAWANE G MITCHELL, DAWANE GODSKYLL MITCHELL

Current Prison Sentence History:

Offense Date	Offense	Sentence Date	County	Case No.	Prison Sentence Length
07/27/1993	BURGLARY, ARMED W/EXP. OR WEAP	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	ROBB. GUN OR DEADLY WPN	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D

Note: The offense descriptions are truncated and do not necessarily reflect the crime of conviction. Please refer to the court documents or the Florida Statutes for further information or definition.

Incarceration History:

Date In-Custody	Date Out-Custody
09/20/1995	11/01/2005

First Previous Next Last Return to List

New Search

Record: 1 of 1

The Florida Department of Corrections updates this information regularly, to ensure that it is complete and accurate, however this information can change quickly. Therefore, the information on this site may not reflect the true current location, status, release date, or other information regarding an inmate.

This database contains public record information on felony offenders sentenced to the Department of Corrections. This information only includes offenders sentenced to state prison or state supervision. Information contained herein includes current and prior offenses. Offense types include related crimes such as attempts, conspiracies and solicitations to commit crimes. Information on offenders sentenced to county jail, county probation, or any other form of supervision is not contained. The information is derived from court records provided to the Department of Corrections and is made available as a public service to interested citizens. The Department of Corrections makes no guarantee as to the accuracy or completeness of the information contained herein. Any person who believes information provided is not accurate may contact the Department of Corrections.

For questions and comments, you may contact the Department of Corrections, Bureau of Admission and Release, at (850) 488-9167 or go to Frequently Asked Questions About Inmates for more information. This information is made available to the public and law enforcement in the interest of public safety.

Search Criteria: DC#: 467531 Search Aliases: NO Offense Category: Release Facility: ALL Stated County of Residence Upon Release: ALL County of Commitment: ALL

[Return to Corrections Offender Information Network](#)

About Us

As Florida's largest state agency, and the third largest prison system in the country, FDC employs 24,000 members, incarcerates approximately 96,000 inmates and supervises nearly 166,000 offenders in the community.

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 Inspector General
 Prison Rape Elimination Act

Contact Us

501 South Calhoun Street
 Tallahassee, FL 32399-2500
 Main: (850) 488-5021
 Phone Directory
 Citizen Services

Defendant

Dwayne Mitchell

Case Number

93-26777

CHARGES/COSTS

The Defendant is hereby ordered to pay the following sum if checked:

- ☒ Fifty dollars (\$50.00) pursuant to F.S. 960.20 (Crimes Compensation Trust Fund).
- ☒ Three dollars (\$3.00) as a court cost pursuant to F.S. 943.25(3) (Criminal Justice Trust Fund)
- ☒ Two dollars (\$2.00) as a court cost pursuant to F.S. 943.25(13) Criminal Justice Education by Municipalities and Counties.
- ☐ A fine in the sum of \$ _____ pursuant to F.S. 775.0835. (This provision refers to the optional fine for the Crimes Compensation Trust Fund, and is not applicable unless checked and completed. Fines imposed as a part of a sentence to F.S. 775.083 are to be recorded on the Sentence page(s).)
- ☐ Twenty dollars (\$20.00) pursuant to F. S. 939.015 (Handicapped and Elderly Security Assistance Trust Fund).
- ☐ A 10 percent surcharge in the sum of \$ _____ pursuant to 775.0836 (Handicapped and Elderly Security Assistance Trust Fund).
- ☒ A sum of \$ 200.00 pursuant to 27.3455 (Local Government Criminal Justice Trust Fund).
- ☐ Restitution in accordance with attached order.
- ☐ Other _____

u
Judge

FINGERPRINTS OF DEFENDANT

ELLEN L. LEESFIELD

Fingerprints taken by _____

Name

Title

I HEREBY CERTIFY that the above and foregoing are the fingerprints of the Defendant, _____
and that they were placed thereon by said Defendant in my presence in Open Court this date.

DONE AND ORDERED in Open Court in Dade County, Florida this 6th day of FEBRUARY, 1995.

u
JUDGE
ELLEN L. LEESFIELD

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR DADE COUNTY, FLORIDA.

258

CRIMINAL DIVISION	SENTENCE	CASE NUMBER 93-26777 OBTs NUMBER _____
	(AS TO COUNT <u>1,2,3 & 4</u>)	
THE STATE OF FLORIDA VS. DAWANE GODSKYLL MITCHELL PLAINTIFF DEFENDANT		FILED SEP 12 1995 CLERK

The defendant, being personally before this Court, accompanied by his attorney, J. ROSENBAUM, and having been adjudicated guilty herein, and the Court having given the defendant an opportunity to be heard and to offer matters in mitigation of sentence, and to show cause why he should not be sentenced as provided by law, and no cause being shown and the Court having:

☒ on FEBRUARY 6, 1995 deferred imposition of sentence until this date.

(Check one) ☐ previously entered a judgment in this case on the defendant now resentsences the defendant.

☐ placed the defendant on Probation/Community Control and having subsequently revoked the defendant's Probation/Community Control.

IT IS THE SENTENCE OF THE COURT that the defendant:

☐ pay a fine of \$ _____, pursuant to F.S. 775.083, plus \$ _____ as the 5% surcharge required by F.S. 960.25.

☒ is hereby committed to the custody of the Department of Corrections.

☐ is hereby committed to the custody of the Sheriff of Dade County, Florida.

☐ is sentenced as a youthful offender in accordance with F.S. 958.04.

TO BE IMPRISONED (check one; unmarked sections are inapplicable)

☐ for a term of Natural Life.

☒ for a term of SEVENTEEN (17) YEARS

☐ said SENTENCE IS SUSPENDED for a period of _____ subject to conditions set forth in this Order.

☐ IT IS FURTHER ORDERED that the entry of sentence be suspended as to count(s) _____ of this case.



yo 9-14-95

Defendant DAWANE GODSKYLL MITCHELL

Case Number 93-26777

If "split" sentence,
complete either of
paragraphs

Followed by a period of _____ on Probation/Community Control under the supervision of the Department of Corrections according to the terms and conditions of supervision set forth in a separate order entered herein.

However, after serving a period of _____ imprisonment in _____, the balance of such sentence shall be suspended and the Defendant shall be placed on Probation/Community Control for a period of _____ under supervision of the Department of Corrections according to the terms and conditions of Probation/Community Control set forth in a separate order entered herein.

In the event the defendant is ordered to serve additional split sentences, all incarceration portions shall be satisfied before the defendant begins service of the supervision terms.

SPECIAL PROVISIONS

(As to Count 1, 2, 3 & 4)

By appropriate notation, the following provisions apply to the sentence imposed:

MANDATORY/MINIMUM PROVISIONS:

FIREARM	<u>X</u>	It is further ordered that the three year minimum imprisonment provisions of Florida Statute 775.087(2) are hereby imposed for the sentence specified in this count.
DRUG TRAFFICKING	_____	It is further ordered that the _____ mandatory minimum imprisonment provisions of Florida Statute 893.135(1) are hereby imposed for the sentence specified in this count.
CONTROLLED SUBSTANCE WITHIN 1000 FEET OF SCHOOL	_____	It is further ordered that the three year minimum imprisonment provisions of Florida Statute 893.13(1)(e)1, are hereby imposed for the sentence specified in this count.
HABITUAL FELONY OFFENDER	_____	The Defendant is adjudicated a habitual felony offender and has been sentenced to an extended term in this sentence in accordance to the provisions of Florida Statute 775.084(4). The requisite findings by the court are set forth in a separate order or stated on the record in open court.
HABITUAL VIOLENT OFFENDER	_____	The Defendant is adjudicated a habitual violent felony offender and has been sentenced to an extended term in accordance with the provisions of Florida Statute 775.084(4). A minimum term of _____ year(s) must be served prior to release. The requisite findings by the court are set forth in a separate order or stated on the record in open court.
LAW ENFORCEMENT PROTECTION ACT	_____	It is further ordered that the defendant shall serve a minimum of _____ years before release in accordance with Florida Statute 775.0823.
CAPITAL OFFENSE	_____	It is further ordered that the Defendant shall serve no less than 25 years in accordance with the provisions of Florida Statute 775.082(1).
SHORT-BARRELED RIFLE, SHOTGUN, MACHINE GUN	_____	It is further ordered that the five-year minimum provisions of Florida Statute 790.221(2) are hereby imposed for the sentence specified in this court.
CONTINUING CRIMINAL ENTERPRISE	_____	It is further ordered that the 25 year mandatory minimum sentence provisions of Florida Statute 893.20 are hereby imposed for the sentence specified in this count.

00221001

Defendant DAWANE GODSKYLL MITCHELL

Case Number 93-26777

OTHER PROVISIONS

RETENTION OF
JURISDICTION

_____ The Court retains jurisdiction over the defendant pursuant to Florida Statutes 947.16(3).

JAIL CREDIT

X

It is further ordered that the Defendant shall be allowed a total of 232 days as credit for time incarcerated prior to imposition of this sentence.

PRISON CREDIT

_____ It is further ordered that the Defendant be allowed credit for all time previously served on this count in the Department of Corrections prior to resentencing.

CONSECUTIVE/
CONCURRENT AS TO
OTHER COUNTS

X

It is further ordered that the sentence imposed for count(s) 1, 2, 3 & 4 shall run (check one) ☐ consecutive to ☒ concurrent with the sentence set forth in count(s) 1, 2, 3 & 4 of this case.

CONSECUTIVE/
CONCURRENT AS TO
OTHER CONVICTIONS

_____ It is further ordered that the composite term of all sentences imposed for the counts specified in this order shall run ☐ consecutive to ☐ concurrent with the following:

_____ Any active sentence being served.

_____ Specific sentences: _____

In the event the above sentence is to the Department of Corrections, the Sheriff of Dade County, Florida, is hereby ordered and directed to deliver the defendant to the Department of Corrections at the facility designated by the Department together with a copy of this Judgment and Sentence and any other documents specified by Florida Statutes.

The defendant in Open Court was advised of his right to appeal from this sentence by filing notice of appeal within thirty days from this date with the Clerk of this Court, and the defendant's right to the assistance of counsel in taking said appeal at the expense of the State upon showing of indigence.

In imposing the above sentence, the Court further recommends _____

DONE AND ORDERED in Open Court at Dade County, Florida, this 12th day of SEPTEMBER, 1995

ELLEN L. LEESFIELD
JUDGE

ELLEN L. LEESFIELD

☒ IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT IN AND FOR DADE COUNTY, FLORIDA.
☐ IN THE COUNTY COURT IN AND FOR DADE COUNTY, FLORIDA.

DIVISION
☒ CRIMINAL
☐ TRAFFIC
☐ OTHER

ORDER
 AMENDING SENTENCE

CASE NUMBER
 93-26777

THE STATE OF FLORIDA VS.

DAWANE GODSKYLL MITCHELL

CLOCK IN

FILED

NOV 22 1995

PLAINTIFF

DEFENDANT

IT IS HEREBY ORDERED AND ADJUDGED that the sentence imposed upon the Defendant on
SEPTEMBER 12, 1995, be and the same is hereby amended as follows:

IT IS FURTHER CONSIDERED, ORDERED AND ADJUDGED that the Defendant be given credit for time incarcerated
 prior to the imposition of this sentence, to-wit: FIVE HUNDRED AND NINETY-EIGHT (598) DAYS.

DONE AND ORDERED at Miami, Florida this 29th day of NOVEMBER, 19 95.

NUNC PRO TUNC: SEPTEMBER 12, 1995
 (Now For Then) Date

RECORDED

DEC 08 1995

Clerk of Circuit
 & County Courts

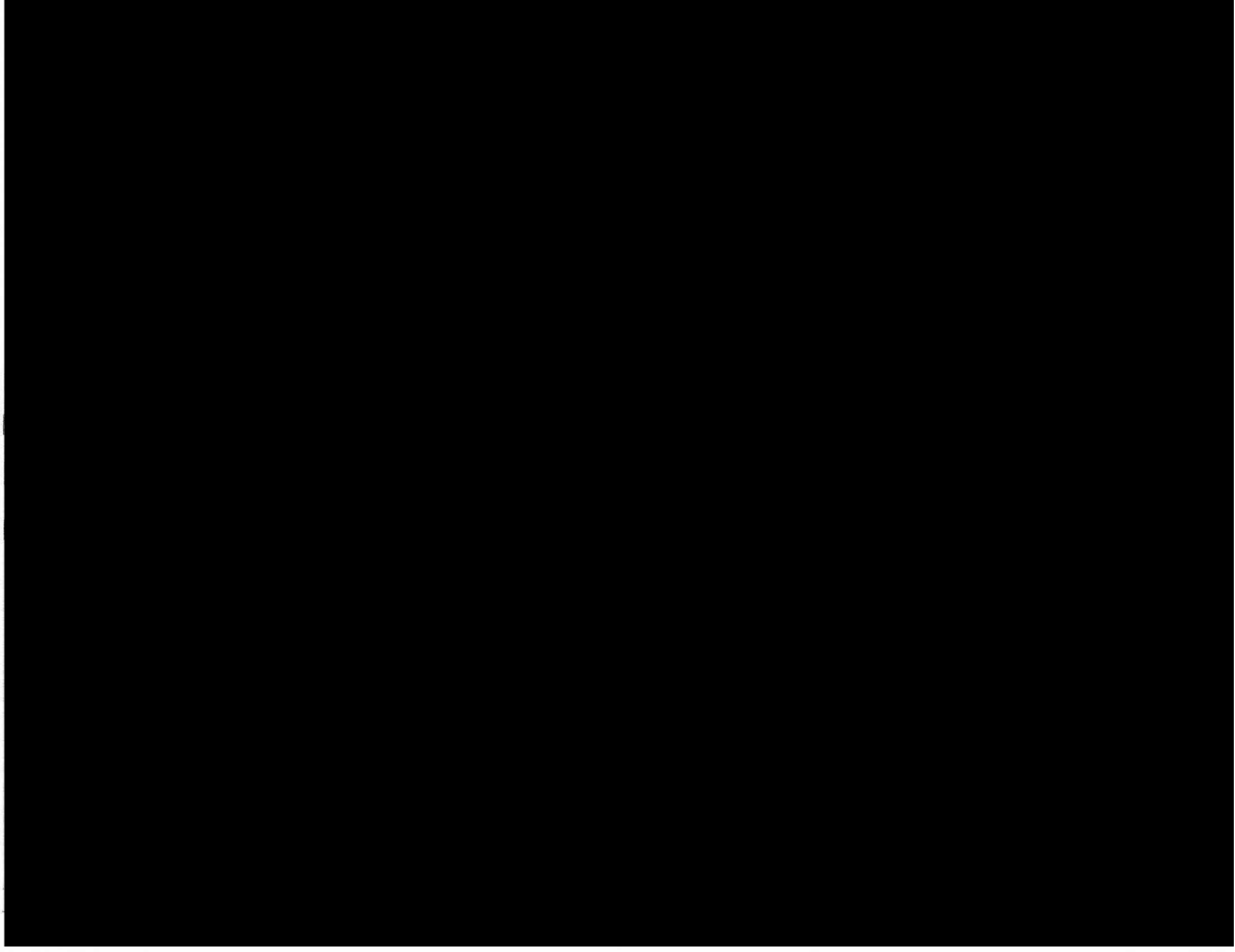
JUDGE

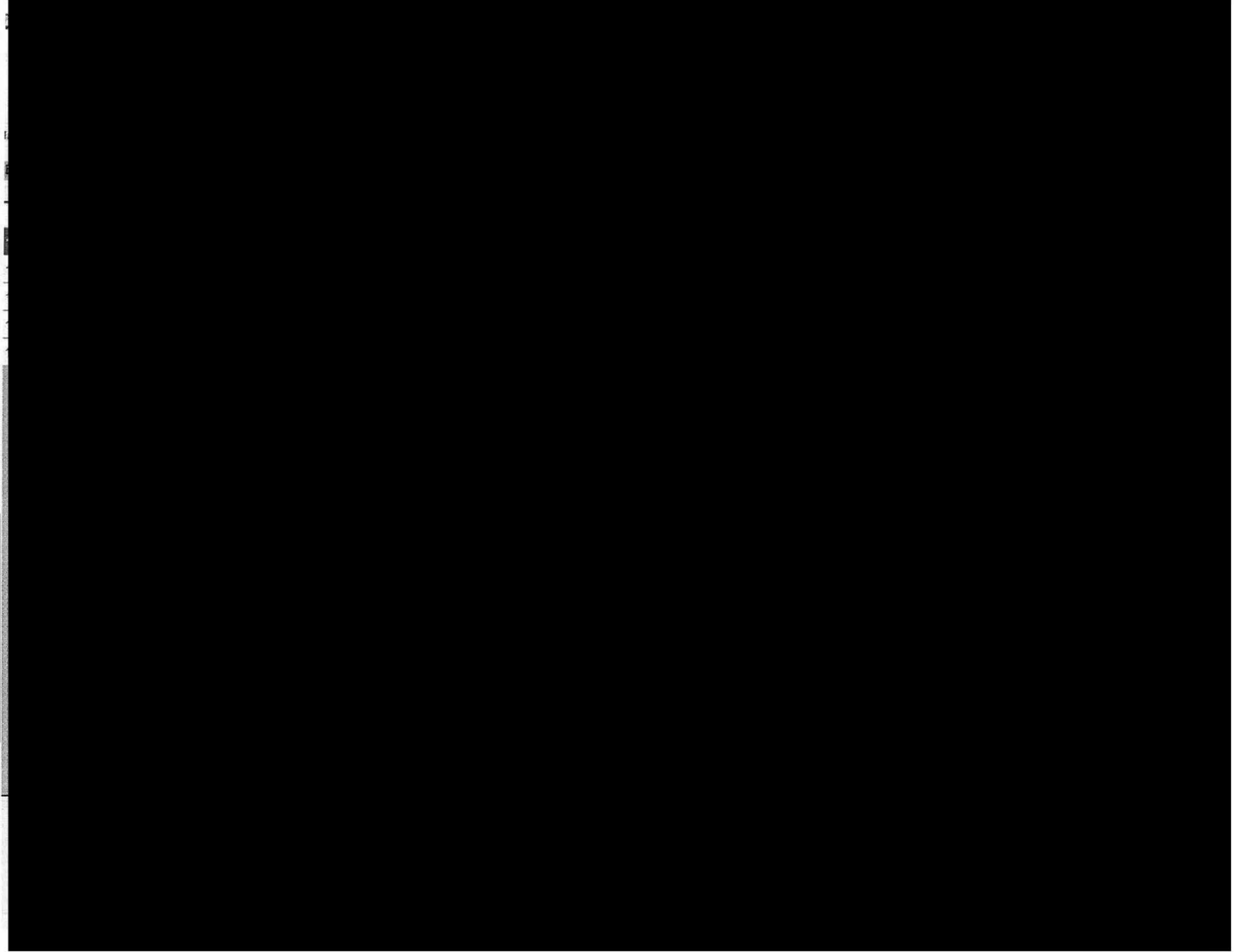
ELLEN L. LEESFIELD

AJ 11-30-95 *fr*

OFF REC CK

17013PG5421

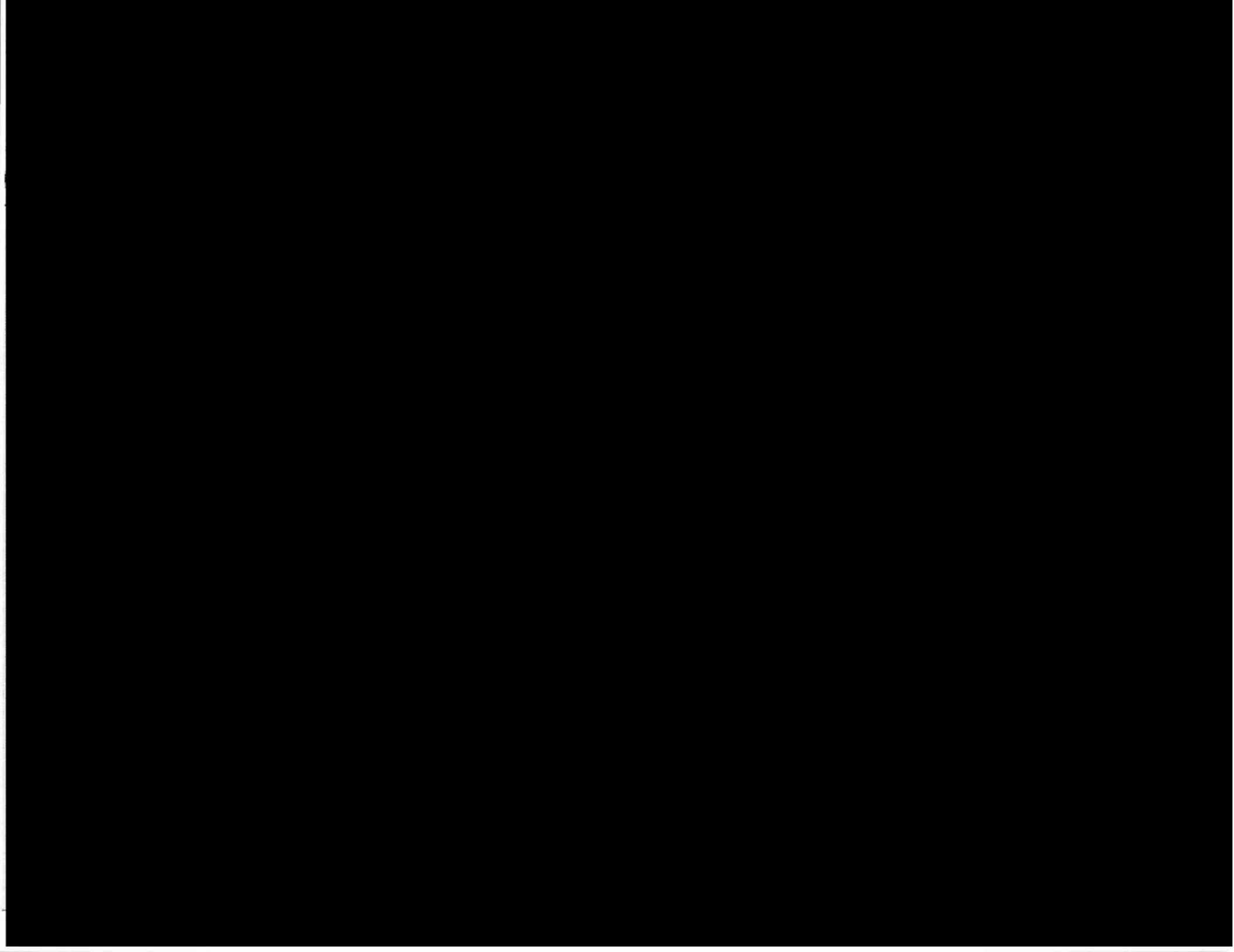


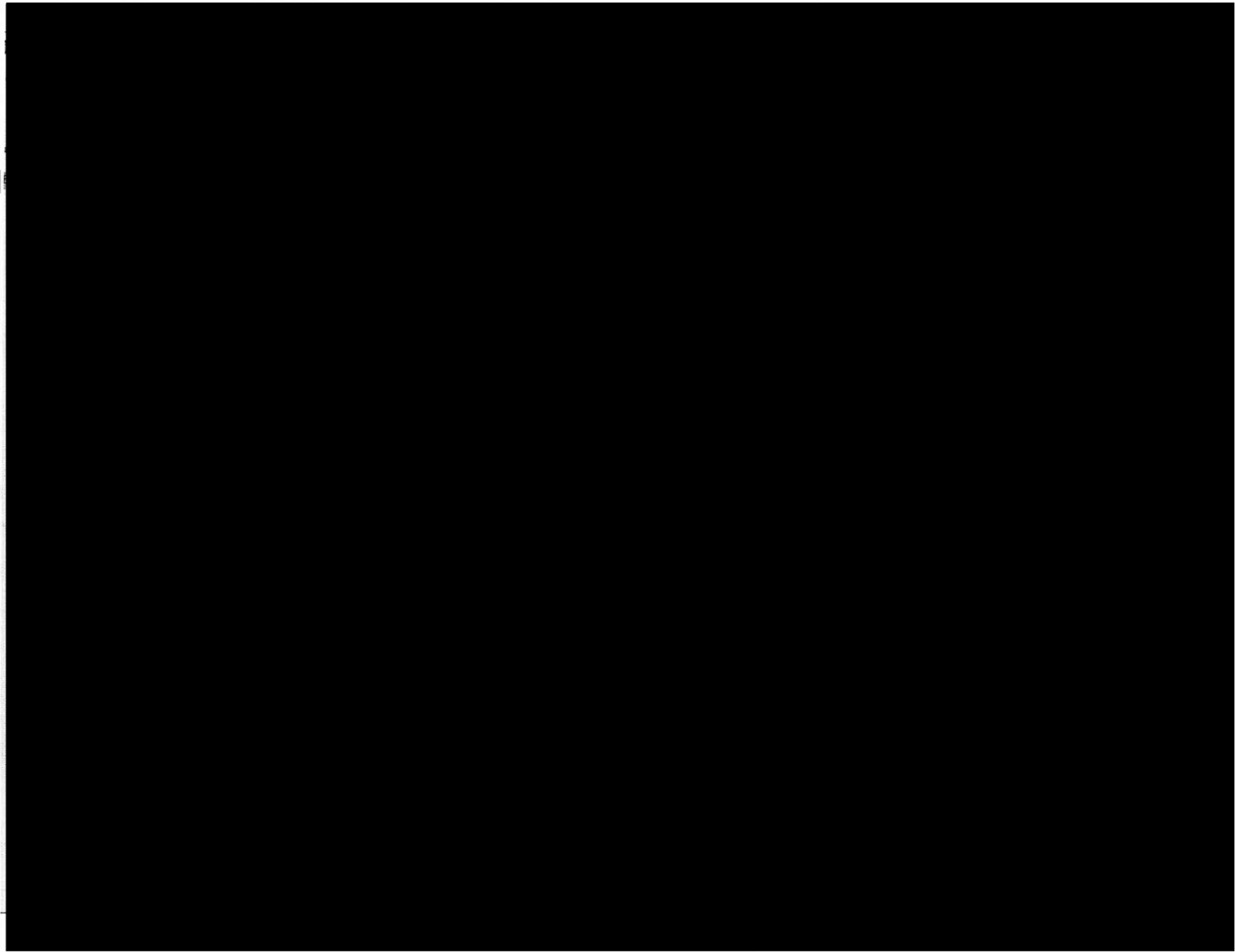




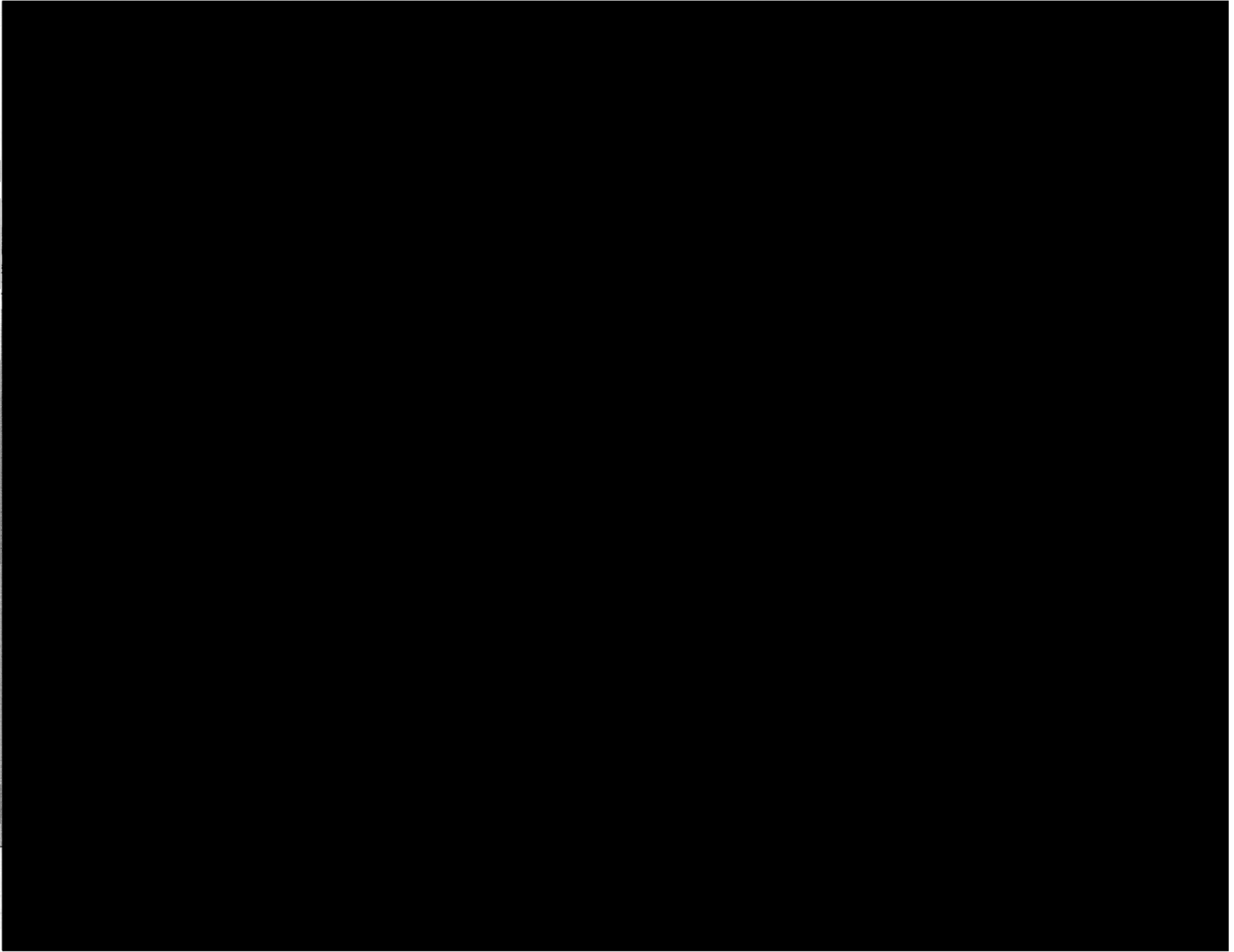


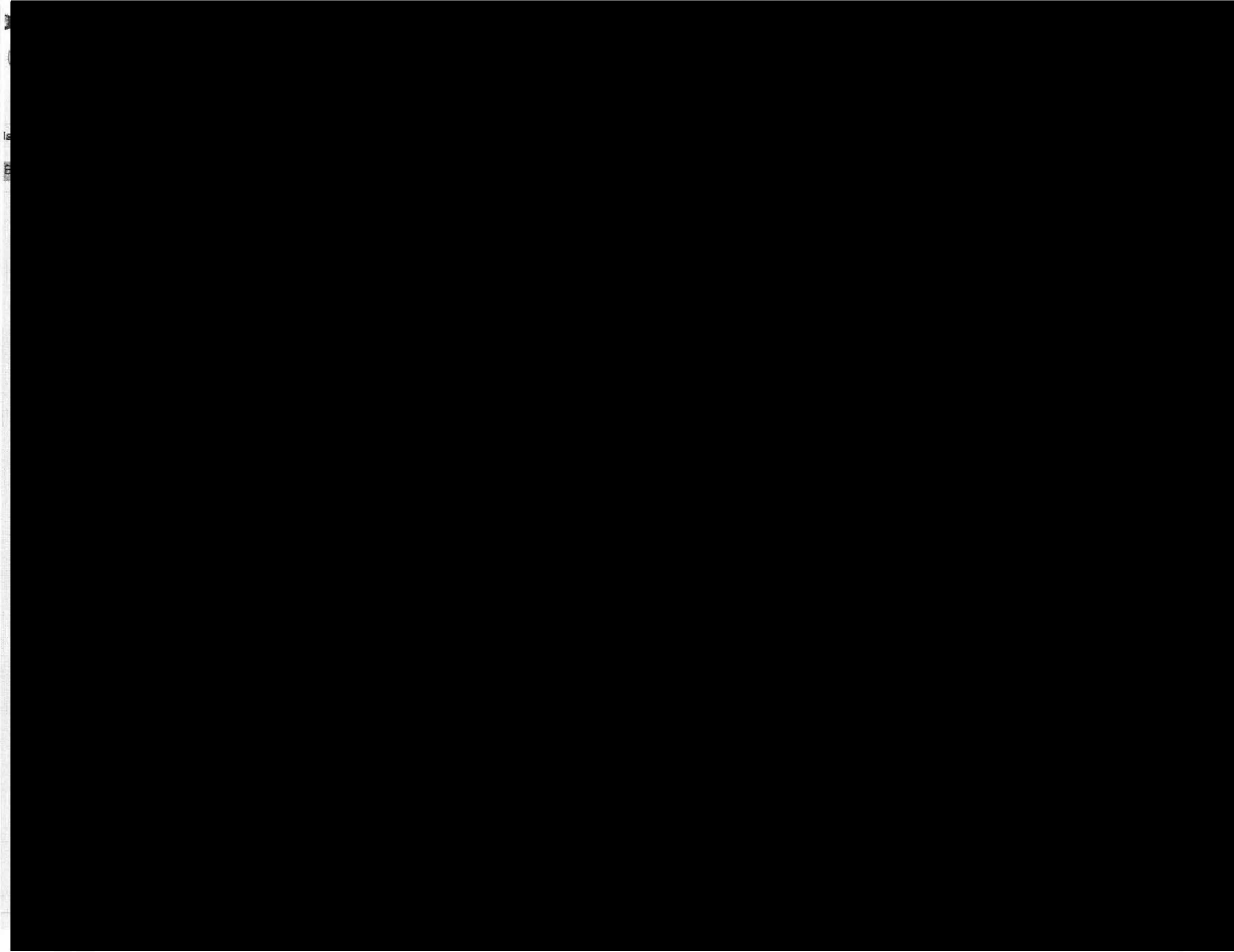


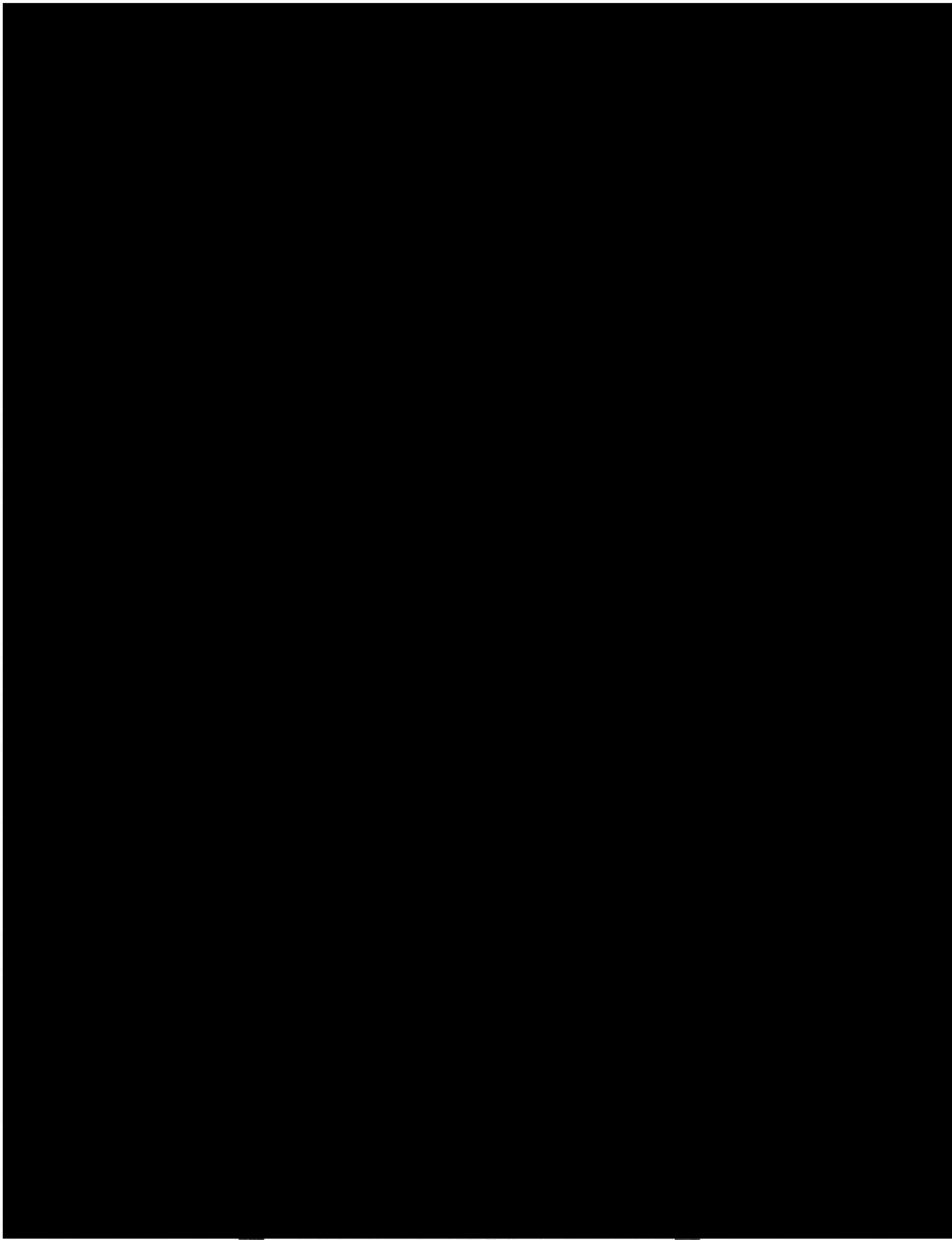


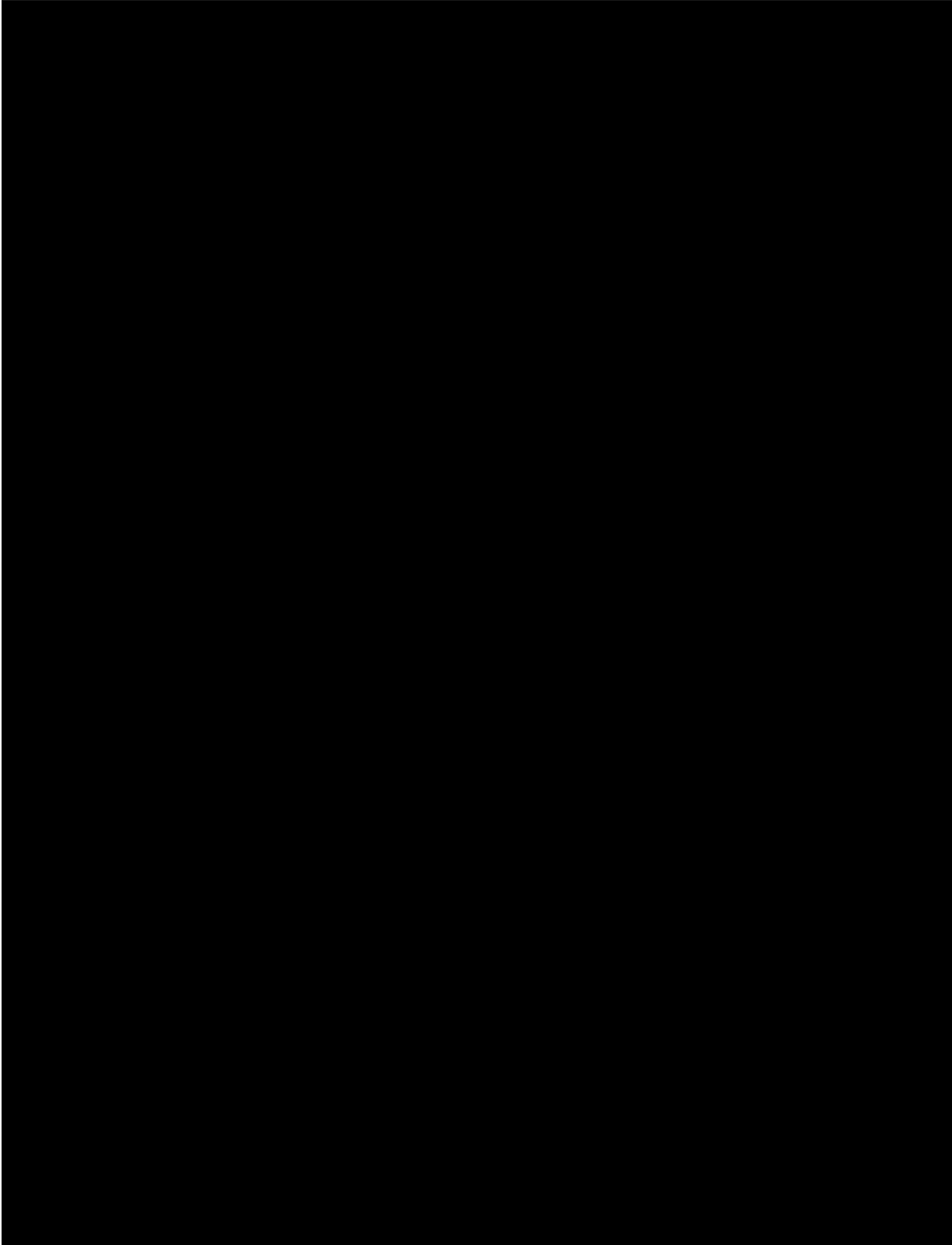


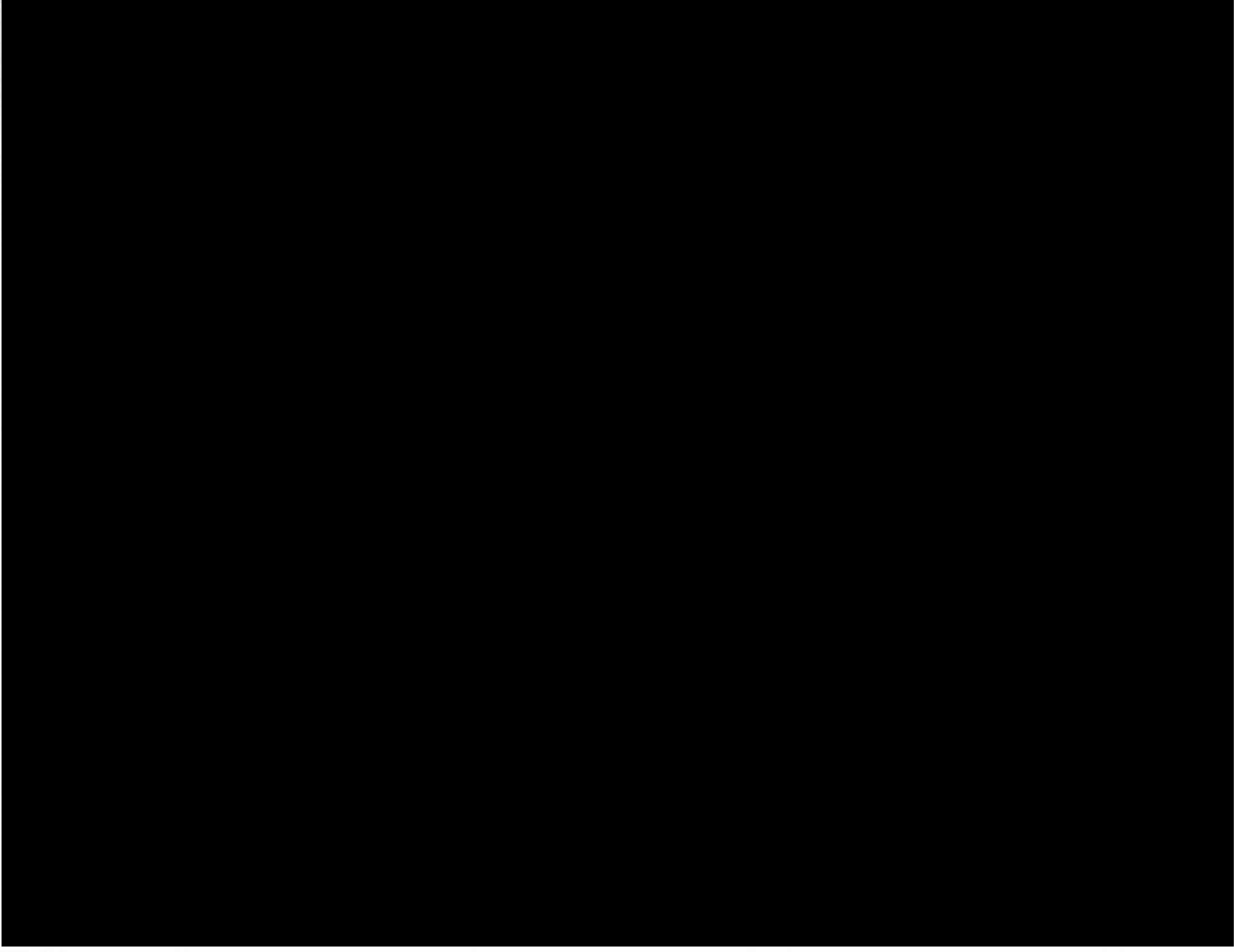


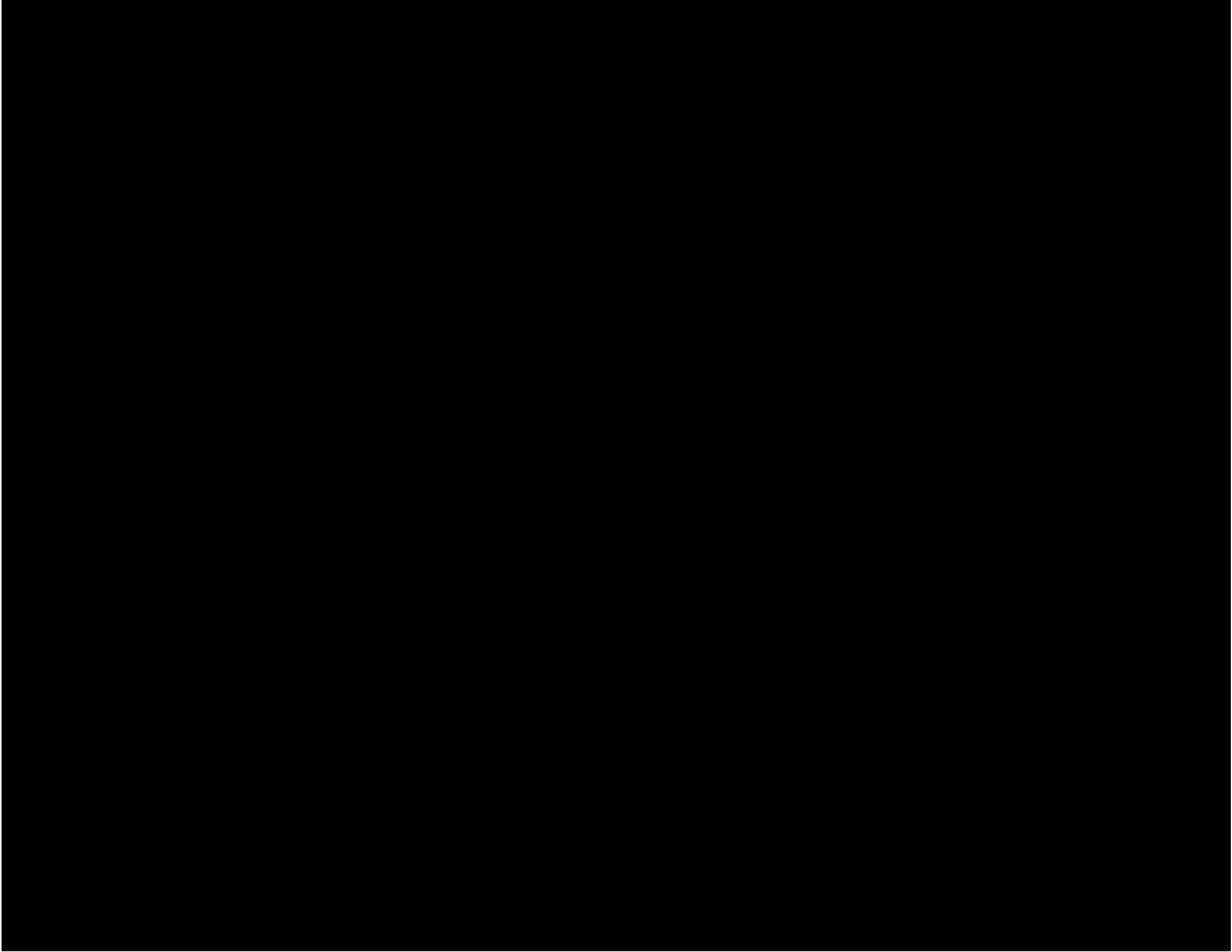




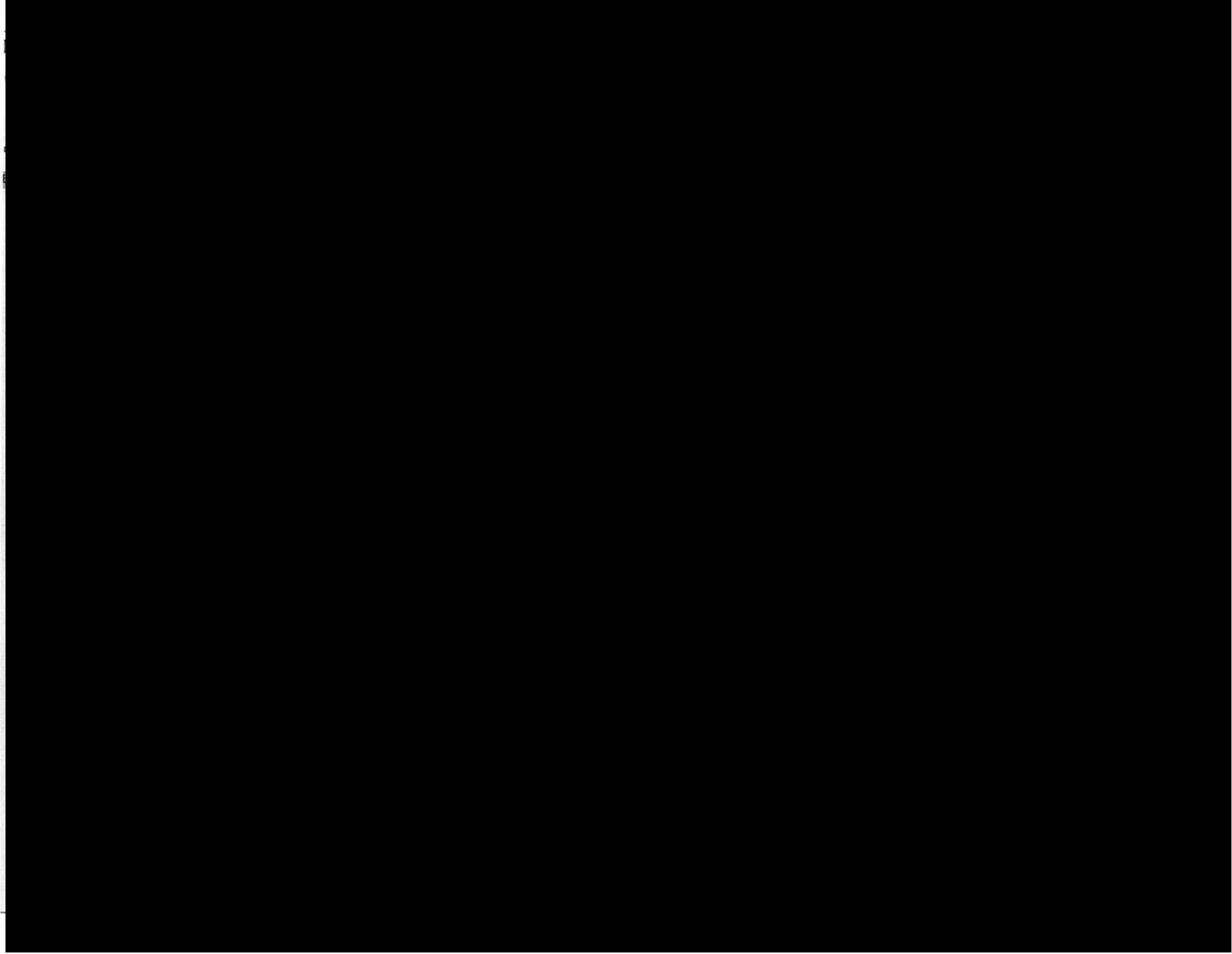


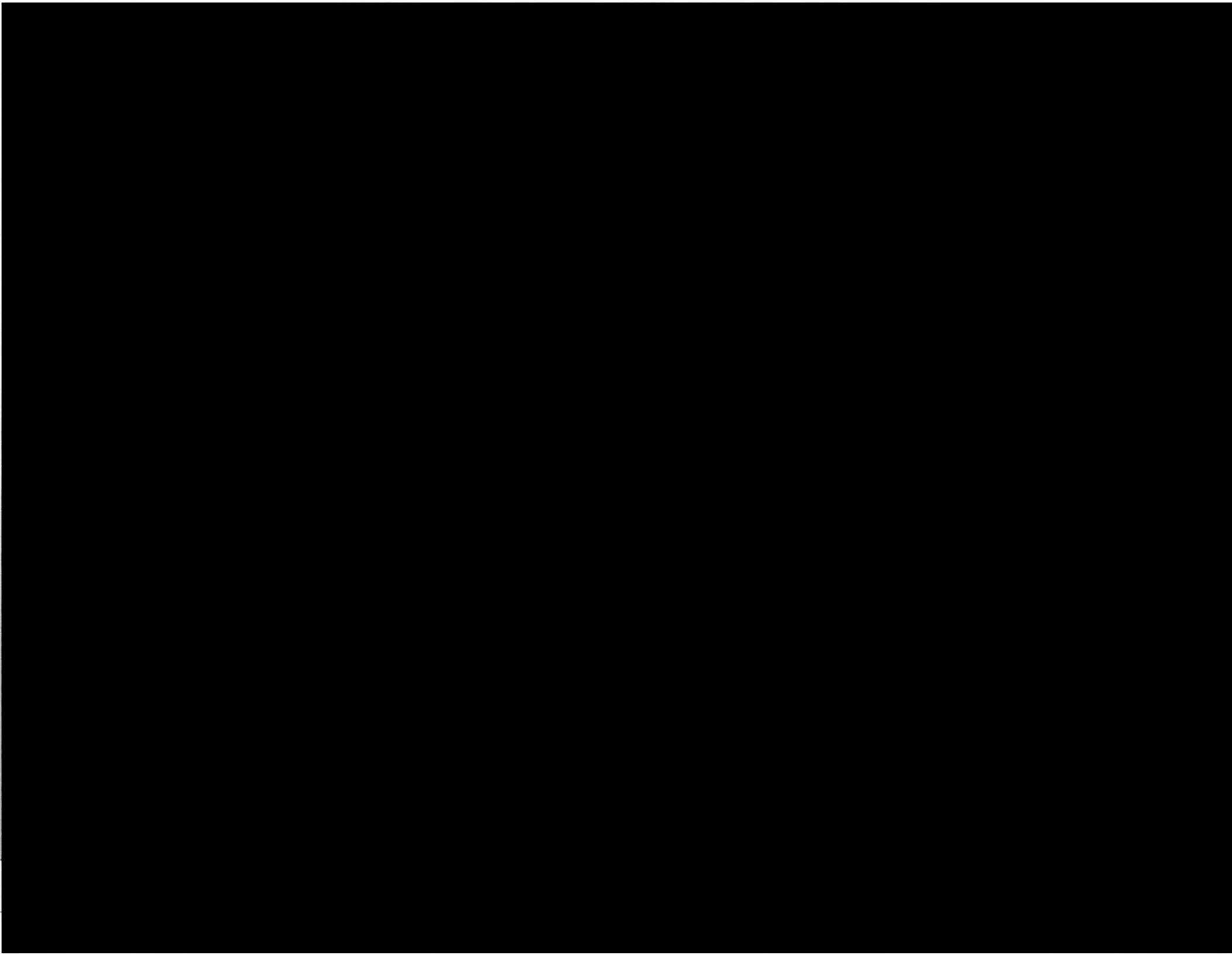


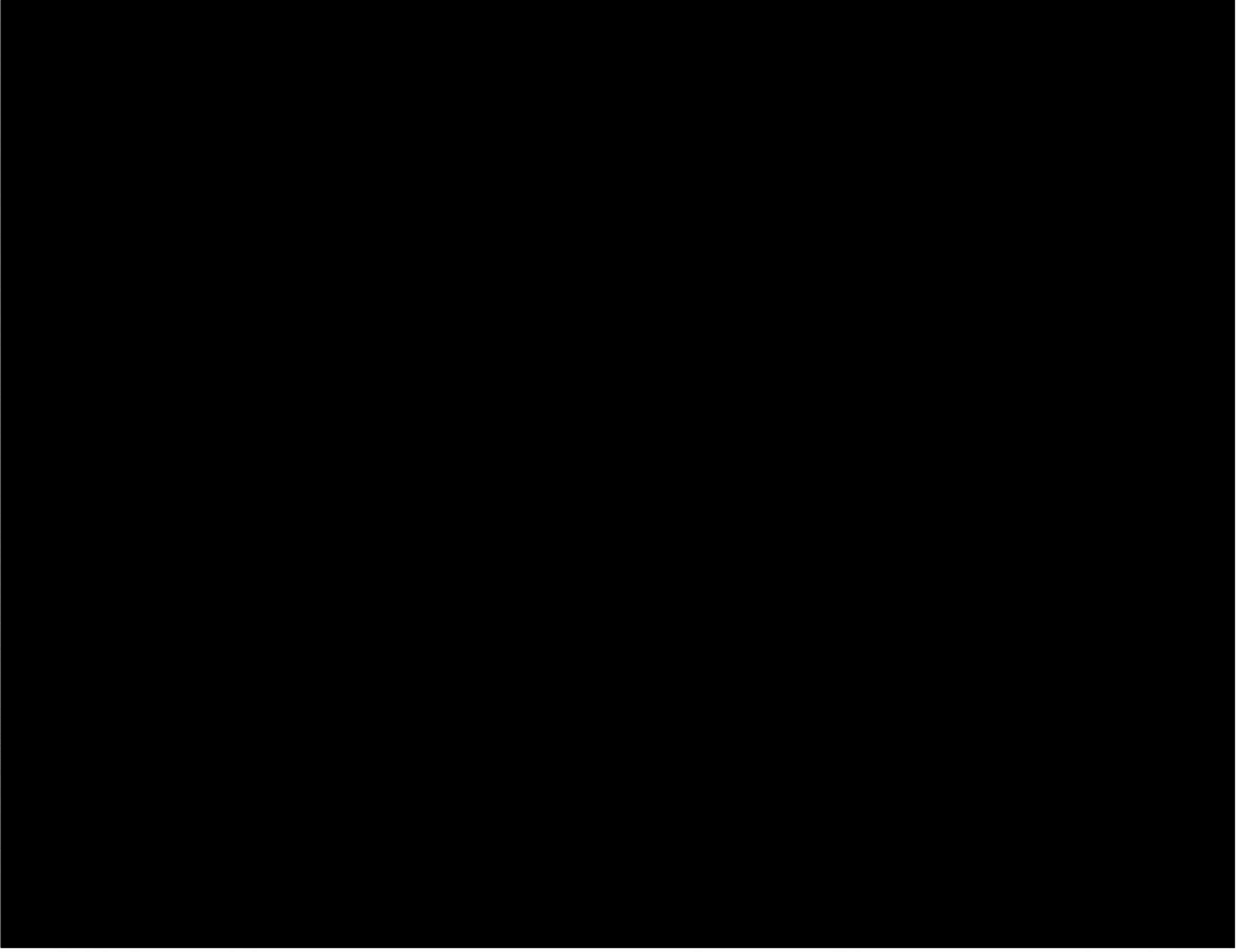


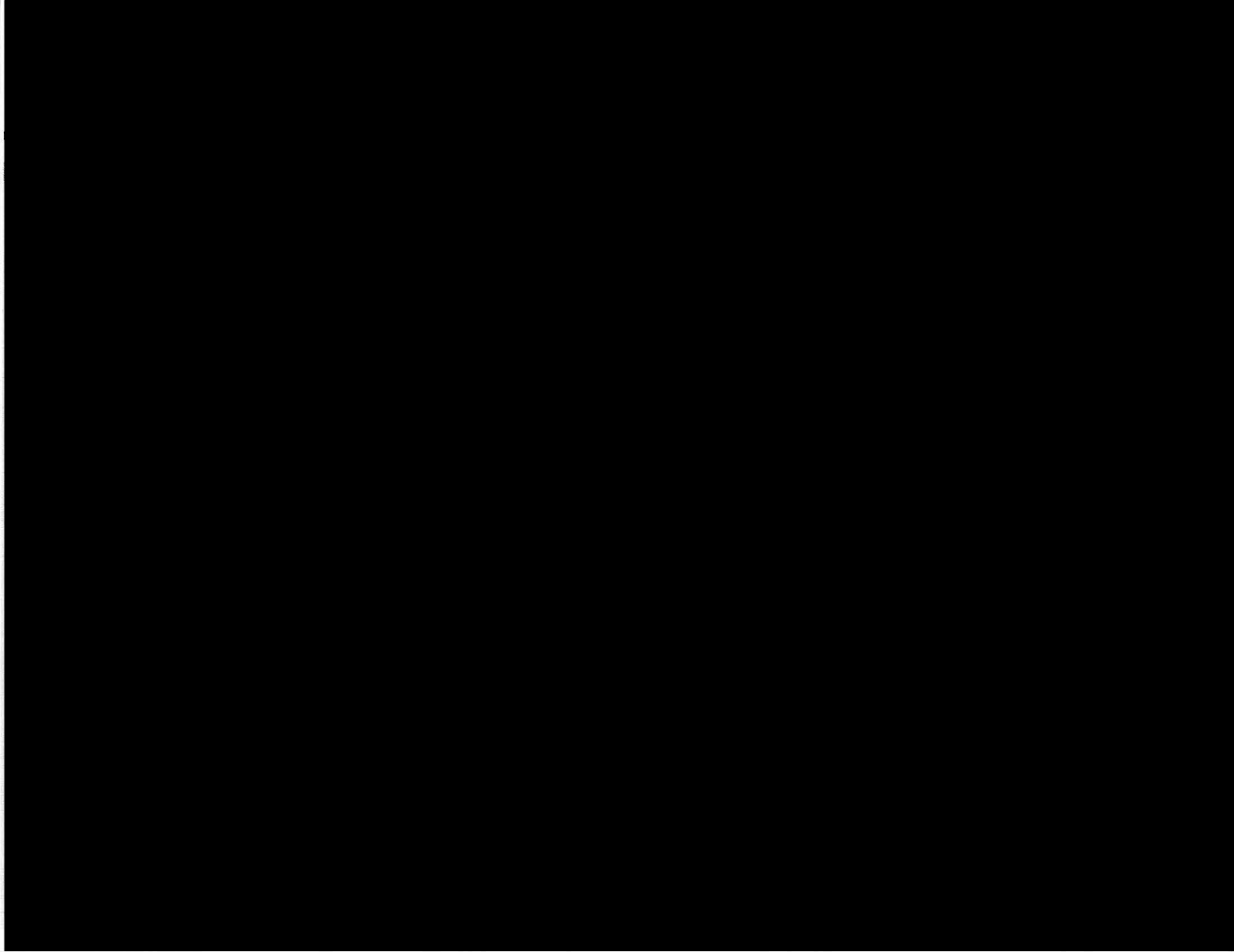


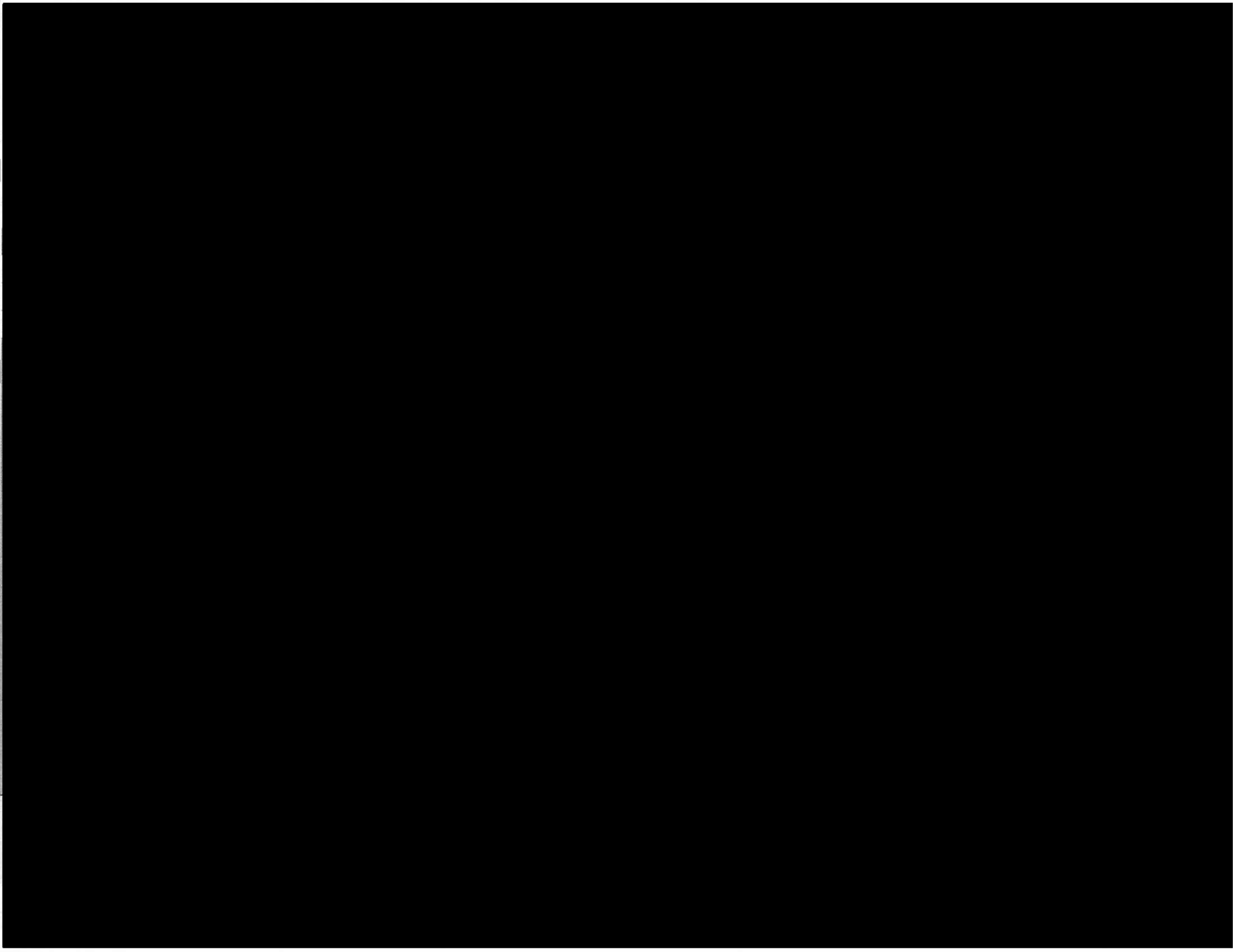


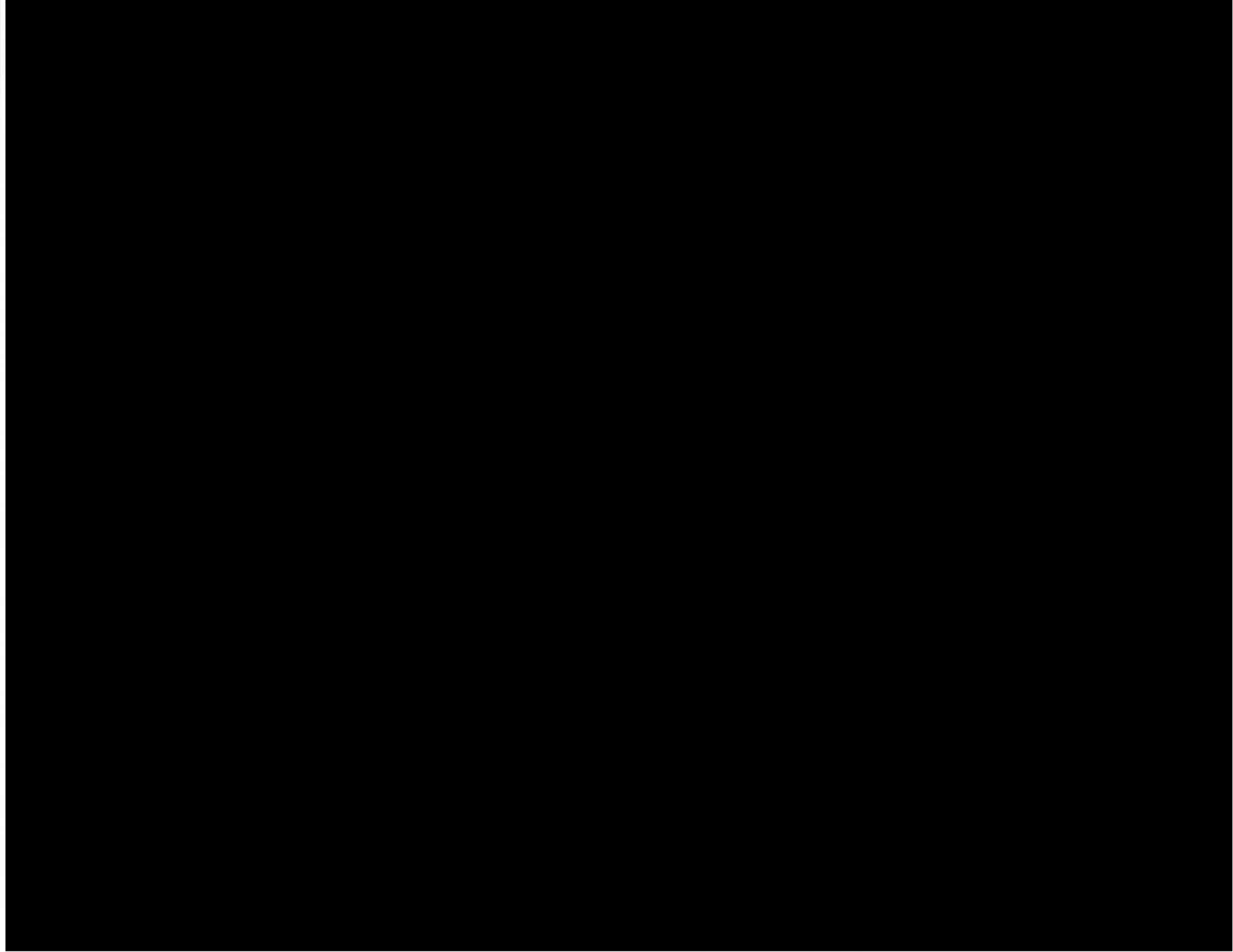














Doc Images Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

BRO Hubbard, Terry L

2774 NW 4Th Ct, Pompano Beach, 33069

Last	Style	First	Middle	Driver License	Source	Soc Sec Num	Source
Hubbard	▼	Terry	Lewis	- - - - -	F,Form ▼		F,Form ▼

Nbr	Suf	Dir	Street Name	Type	Dir	Unit Type	Nbr	City Name	County	Zip Code
2774		NW ▼	4Th	Ct ▼	▼	▼		Pompano Beach	BROWARD	33069

City	State	Zip Code	Country

Email Address

☐ Receive Sample Ballots by Email

Language Preference: None ▼

Sex	Race	Party	Pty Chg Req Dte	Regn Date	<input type="checkbox"/> See Comms	Reason(Status)
M ▼	3,Black, not Hispanic ▼	DEM,Florida Democratic Par ▼	/ /	08/07/2019		E(P) Civil Rights Felon ▼

Date of Birth	Birth Place	Telephone	Ext
06/23/1958	BROWARD		

☐ Assistance?

☐ Addr Protect?

☐ ID Required to Vote

☐ EW Interest?

☐ Fed Elections Only

☐ Photo Id Seen

Photo ID Type

▼

Print Name/Addr

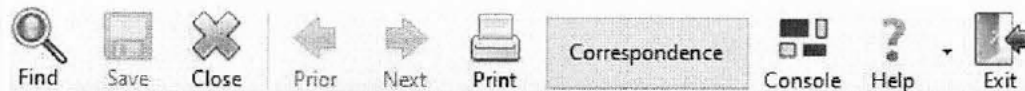
Print Address

Edit Address

Print Reg

Voter Response

Districts					
Precinct	Cng	Sen	Hse	CC	SB
C028.2	20	33	92	2	7



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BRO Hubbard, Terry L

2774 NW 4Th Ct, Pompano Beach, 33069

Agency: Your signature can be scanned but not copied (Section 97.6565 Fla. Stat.)

Boxes: Please check boxes () where applicable.

Numbered rows 1 through 12 and 13 are to be completed for each registrant.

Florida Voter Registration Application
Form available at www.flhsmr.gov or by phone at 1-800-352-7353

This is: ☐ New Registration ☒ Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) ☐ Request to Replace Voter Information Card

1 Are you a citizen of the United States of America? ☒ YES ☐ NO

2 ☐ I affirm I have never been convicted of a felony.
☐ If I have been convicted of a felony, I affirm my voting rights have been restored by the Board of Executive Clemency.
☒ If I have been convicted of a felony, I affirm my voting rights have been restored pursuant to s. 4, Art. VI of the State Constitution upon the completion of all terms of my sentence, including parole or probation.

3 ☒ I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.

4 Date of Birth (mm/dd/yyyy): 02-25-1965

5 Florida Driver License (FL DL) or Florida Identification (FL ID) Card Number: [redacted]
If no FL DL or FL ID, then provide: [redacted]

6 Last Name: POTLEDGE First Name: SEDNEY Middle Name: Marie Sarita (Dr., Sr., III, etc.):

7 Address Where You Live (legal residence - not a P.O. Box): 319 NW 1st St Apt/Lot/Unit: 1 City: Pompano County: Broward Zip Code: 33361

8 Mailing Address (if different from above address): Apt/Lot/Unit: City: State or Country: Zip Code:

9 Address Where You Were Last Registered to Vote: Apt/Lot/Unit: City: State: Zip Code:

10 Former Name (if name is changed): Gender: ☒ M ☐ F State or Country of Birth: ILLINOIS Telephone No. (optional): 786 514-7553

11 ☐ Email me SAMPLE BALLOTS if option is available in my county. (See Public Record Notice above) My email address is:

Party Affiliation (Check only one. If left blank, you will be registered without party affiliation)
☒ Florida Democratic Party
☐ Republican Party of Florida
☐ No party affiliation
☐ Minor party (print party name):

Race/Ethnicity (Check only one)
☐ American Indian/Alaskan Native
☐ Asian/Pacific Islander
☒ Black, not of Hispanic Origin
☐ Hispanic
☐ White, not of Hispanic Origin
☐ Multi-racial
☐ Other:

(Check only one if applicable)
☐ I am an active duty Uniformed Services or Merchant Marine member
☐ I am a spouse or a dependent of an active duty uniformed services or merchant marine member
☐ I am a U.S. citizen residing outside the U.S.

☐ I will need assistance with voting.
☐ I am interested in becoming a poll worker.

12 Oath: I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as an elector under the Constitution and laws of the State of Florida, and that all information provided in this application is true.

SIGN HERE: [redacted]


Date: 2-18-2020





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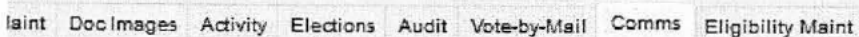
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BRO [redacted] Hubbard, Terry L 2774 NW 4Th Ct, Pompano Beach, 33069

Default Ballot Address	Precinct	Party	Vote-by-Mail Status	Comment
Default Address Not Avail for Non_county	C028.	Dem	P Permanent	
Military <input type="checkbox"/>	Mil Dep <input type="checkbox"/>	Email		Date of Birth 06/23/1958



2774 NW 4Th Ct, Pompano Beach, 33069

#	Date	I/O	Operator	Type
1240905501	6/3/2022 12:00 AM	O	BROWARD/brofab5	REMOVALNTC
1219365668	4/27/2022 12:00 AM	O	BROWARD/brofab5	Felon Letter
1007366241	3/3/2020 12:00 AM	O	BROWARD/Brofab5	Voter ID Card
947079124	8/20/2019 12:00 AM	O	BROWARD/BROFAB5	Voter ID Card
944988930	8/9/2019 12:00 AM	O	BROWARD/BROFAB5	Voter ID Card

Undeliverable Mail Returned

12

Agency: Your signature can be viewed but not copied. (Section 07.0585, Fla. Stat.)

Boxes: Please check boxes () where applicable.

Print serials rows 1 through 7 and 12 must be completed for a successful registration.

Florida Voter Registration Application

Form available for download at: <http://www.floridavoters.com>

This is: ☒ New Registration ☐ Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) ☐ Request to Replace Voter Information Card

1 Are you a citizen of the United States of America? ☒ YES ☐ NO

2 ☐ I affirm I have never been convicted of a felony.
☐ If I have been convicted of a felony, I affirm my voting rights have been restored by the Board of Executive Clemency.
☒ If I have been convicted of a felony, I affirm my voting rights have been restored pursuant to s. 4, Art. VI of the State Constitution upon the completion of all terms of my sentence, including parole or probation.

3 ☒ I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.

4 Date of Birth (MM/DD/YYYY): 06 - 23 - 1958

5 Florida Driver License (FL DL) or Florida Identification (FL ID) Card Number: [REDACTED] If no FL DL or FL ID, then provide: [REDACTED] Last 4 digits of Social Security Number: [REDACTED] ☐ I have NONE of these numbers.

6 Last Name: Hubbard First Name: Terry Middle Name: Name Suffix: (e.g., Sr., II, etc.):

7 Address Where You Live (legal residence for P.O. Box): 2774 NW 4th Ct Apt/Lot/Unit: City: Pompano County: Broward Zip Code: 33069

8 Mailing Address (if different from above address): Apt/Lot/Unit: City: State or Country: Zip Code:

9 Address Where You Were Last Registered to Vote: Apt/Lot/Unit: City: State: Zip Code:

10 Former Name (if name is changed): Gender: ☒ M ☐ F State or Country of Birth: Florida Telephone No. (optional):

11 ☐ Employ me SAMPLE BALLOTS if option is available in my county. (See Public Record Notice above) My email address is:

Party Affiliation (Check only one, if left blank, you will be registered without party affiliation):
☒ Florida Democratic Party
☐ Republican Party of Florida
☐ No party affiliation
☐ Minor party (print party name):

Race/Ethnicity (Check only one):
☐ American Indian/Alaskan Native
☐ Asian/Pacific Islander
☒ Black, not of Hispanic Origin
☐ Hispanic
☐ White, not of Hispanic Origin
☐ Multi-racial
☐ Other:

(Check only one if applicable):
☐ I am an active duty Uniformed Services or Merchant Marine member
☐ I am a spouse or a dependent of an active duty uniformed services or merchant marine member
☐ I am a U.S. citizen residing outside the U.S.

☐ I will need assistance with voting.
☐ I am interested in becoming a poll worker.

Signature: [REDACTED] Date: 2/14/20

Oath: I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as a voter under the Constitution and laws of the State of Florida, and that all information provided in this application is true.

SIGN/ MARK HERE



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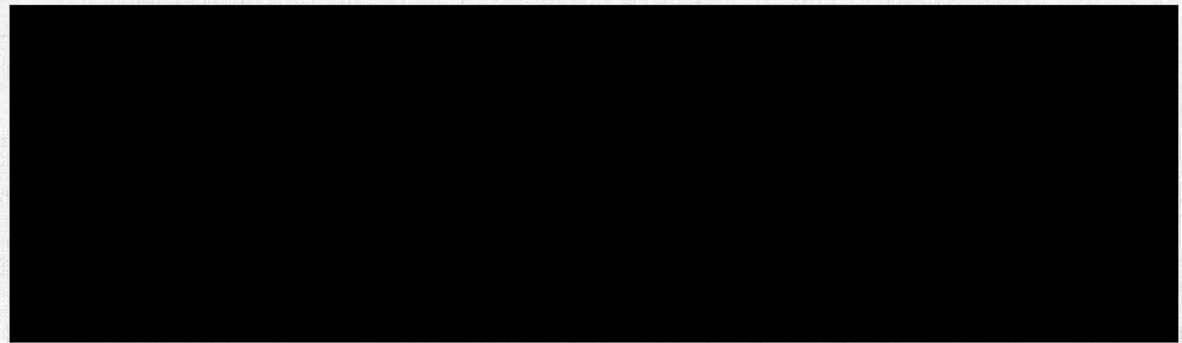
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BRO Hubbard, Terry L 2774 NW 4Th Ct, Pompano Beach, 33069







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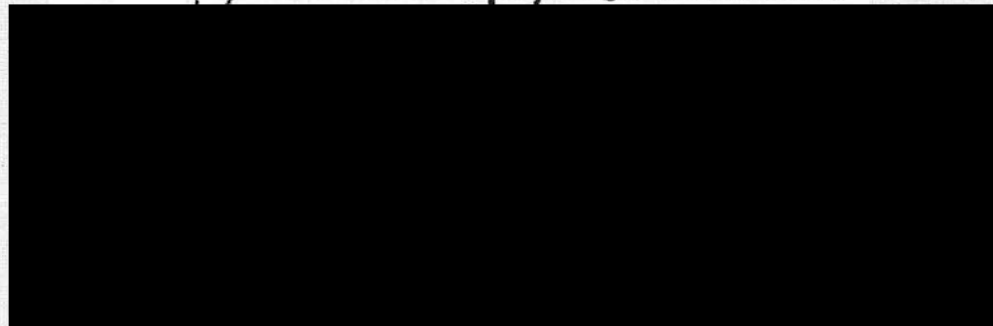
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Search icons and Show Signature button

Origin ☐ I am a spouse or a dependent of an active dut services or merchant marine member

Origin ☒ I am a U.S. citizen residing outside the U.S.



Navigation arrows and Date Image Scanned 02/21/2020

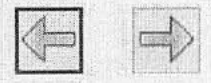


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