

**CANDIDATE OATH -
JUDICIAL OFFICE**

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

SUPERVISOR OF ELECTIONS

2020 APR 20 PM 12:55

PALM BEACH COUNTY, FL

OFFICE USE ONLY

Candidate Oath

(Section 105.031, Florida Statutes)

I, **Robert Panse**

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the judicial office of County Judge , 15th ,
(Office) (District #) (Circuit #)

14 ; my legal residence is Palm Beach County, Florida; I am a qualified elector
(Group #)

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; 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 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.

Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Candidate's Florida Voter Registration Number (located on your voter information card): 112207476

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): *[Not applicable to write-in candidates.]*

Pans (e is silent)

X Robert Panse (561) 358-5308 robertpanse@bellsouth.net
Signature of Candidate Telephone Number Email Address

P.O. Box 2296 West Palm Beach Florida 33410
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF PALM BEACH

Andrea M. Morris
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of physical presence this 21st day of March, 2020.

Personally Known: X or Produced Identification: _____

Type of Identification Produced: _____



ANDREA M. MORRIS
Commission # GG 362336
Expires August 25, 2023
Bonded Thru Budget Notary Services

FORM 6

FULL AND PUBLIC DISCLOSURE

2019

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

Please print or type your name, mailing address, agency name, and position below:

SUPERVISOR OF ELECTIONS
2020 APR 20 PM 12:55
PALM BEACH COUNTY, FL

LAST NAME — FIRST NAME — MIDDLE NAME:
Panse Robert Gregory

MAILING ADDRESS:
Palm Beach County Courthouse

205 North Dixie Highway

CITY : West Palm Beach, Florida ZIP : 33401 COUNTY : Palm Beach

NAME OF AGENCY :
Fifteenth Judicial Circuit

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
Palm Beach County Court Judge

CHECK IF THIS IS A FILING BY A CANDIDATE

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2019 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of December 31, 20 19 was \$ 921,873.

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 65,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Townhome, [REDACTED]	\$370,000
Boat Slip, [REDACTED]	\$38,746
Boat, 23', 1990 with Outboard Motor, 250 hp, 2019	\$27,000
Automobile, Sedan 2007	\$4500

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Freedom Mortgage Corp. P.O. Box 50428, Indianapolis, In 46250	\$145,313

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

PART D -- INCOME

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2019 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

SUPERVISOR OF ELECTIONS

I elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]

2020 APR 20 PM 12:55

PRIMARY SOURCES OF INCOME (See instructions on page 5):

PALM BEACH COUNTY, FL

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
State of Florida	200 E. Gaines St. Tallahassee, FL 32399	\$145,858

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

PART F - TRAINING

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

Robert Pense
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA

COUNTY OF PALM BEACH

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 31st day of

MARCH, 2020 by ROBERT PENSE.

Andream Morris

(Signature of Notary Public--State of Florida)

ANDREAM MORRIS

Commission # GG 362336

Expires August 25, 2023

(Print, Type, or Stamp Commission of Notary Public)

Personally Known



Type of Identification Produced _____

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

 Signature Date

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

2020 APR 20 PM 12:55

PALM BEACH COUNTY, FL

<u>ASSETS INDIVIDUALLY VALUED AT OVER \$1000</u>	<u>VALUE OF ASSET</u>
Mutual Funds, ROTH IRA- (Janus Henderson)	\$7293
Certificate of Deposit ROTH IRA (Third Federal Savings and Loan)	\$25,506
Certificate of Deposit, IRA (Third Federal Savings and Loan)	\$81,960
Certificate of Deposit, IRA (Third Federal Savings and Loan)	\$13,221
Mutual Fund, ROTH IRA (Vanguard)	\$9947
Certificate of Deposit, IRA (Bank United)	\$10,843
Certificate of Deposit, IRA (Bank United)	\$40,270
Certificate of Deposit, IRA (Amtrust Bank)	\$7073
Certificate of Deposit, IRA (Iberia Bank)	\$40,218
Certificate of Deposit, IRA (Suntrust Bank)	\$4669
Mutual Fund, Deferred Comp (Empower Retirement Services)	\$15,718
Mutual Funds, Deferred Comp (Fidelity Investments)	\$137,936
Certificate of Deposit (Amtrust Bank)	\$15,570
Bank Accounts (Wells Fargo Bank)	\$16,834
Bank Account (BB&T Bank)	\$1186
Certificate of Deposit (Bank United)	\$20,630
Bank Account (Bank United)	\$25,644
Drop Account (State of Florida)	\$54,459
3 Cemetary Plots, Block 39,Tequesta, Fl (Riverside Memorial Park)	\$29,985