CANDIDATE OATH STATE AND LOCAL PARTISAN OFFICE WITH PARTY AFFILIATION

DS-DE 301A (Eff. 10/2023)

SUPERVISOR OF ELECTIONS

2024 JUN 12 AM 11: 50

PALM BEACH COUNTY, FL

OFFICE USE ONLY

| Condidate Ooth | | | | | |
|---|--|--|--|--|--|
| Candidate Oath | | | | | |
| | Name to appear on ballot: Lauro E Diaz | | | | |
| Check box if two last names without hyphen. (Name cannot be changed after qualify | | | | | |
| Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit | on reverse side.) | | | | |
| I swear or affirm that I am a candidate for the office of Sheriff (Office) | (District #) | | | | |
| ; I am a qualified elector of Palm Beach (Circuit #) (Group or Seat #) | County, Florida; | | | | |
| I am a qualified elector 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. | | | | | |
| Statement of Party | | | | | |
| I swear or affirm that I am a member of the Republican Party; I have been a registered party, for which I am seeking nomination as a candidate, for 365 days before the beginning of qualifying preceding which I seek to qualify; and I have paid the assessment levied against me, if any, by the executive committee of the second committee of the second committee of the second committee. | the general election for | | | | |
| which I seek to qualify; and I have paid the assessment levied against me, if any, by the exceeded commune party. | | | | | |
| Statement of Outstanding Fines, Fees, or Penalties I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.). YES, I Do NO, I Do Not No. | | | | | |
| If you do, you must also specify the amount owed and each entity that levied the same on the reverse side | • | | | | |
| \$119.071(4)(d)2.a Little 2489 Vattoo Comps Telephone Number Signature of Candidate Telephone Number | | | | | |
| Signature of Candidate §119.071(4)(d)2.a | 71(4)(d)2.a | | | | |
| Address of Legal Residence City State | ZIP Code Λ | | | | |
| STATE OF FLORIDA | | | | | |
| COUNTY OF Hyplands Signature of Notaty Public Print, Type, or Stamp Commissioned Name | of Notary Public below: | | | | |
| Sworn to (or affirmed) and subscribed before me by means of Shel | lly D. Pettit | | | | |
| online notarization OR physical presence SHELLY D. PETTIT & | | | | | |
| this day of | | | | | |
| Personally Known Gr Produced Identification L | | | | | |
| Type of Identification Produced: | Rule 1S-2.0001, F.A.C. | | | | |

2023 Form 6 - Full and Public Disclosure of Financial Interests

SUPERVISOR OF ELECTIONS

2024 JUN 12 PM 12: 48

General Information

PALM BEACH COUNTY, FL

Name:

Lauro Ernesto Diaz

Address:

§119.071(4)(d)2.a

County:

Organization

Suborganization

Title

N/A

CANDIDATE FOR

Position

Agency Name

Position sought or held

Sheriff

Palm Beach County Sheriff Office

Sheriff

Net Worth

My Net Worth as of December 31, 2023 was \$ 1,348,000.00.

2024 JUN 12 PM 12: 48

Assets

PALM BEACH COUNTY, FL

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 effect is \$138,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

| Description of Asset | Value of Asset |
|----------------------|----------------|
| Cash | \$ 50,000.00 |

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor | Address of Creditor | Amount of Liability |
|--------------------------|--|---------------------|
| Crews Bank | 102 East Interlake Blvd Lake Placid FI 33852 | \$ 355,000.00 |
| Mid Florida Credit Union | 105 East VanFleet Drive Bartow FL 33830 | \$ 20,000.00 |

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

| Name of Creditor | Address of Creditor | Amount of Liability |
|------------------|---------------------|---------------------|
| N/A | | |

SUPPRIVISOR OF ELECTIONS

| Income | | | 2924 JUN 1 | 2 PM 12 | : 48 |
|--|--|-------------------------------------|--|---------------------------------------|------------------|
| income. Or attach a complete Please redact any social secur posted to the Commission's v | e copy of your 202 fity or account nume website. | 23 federal incon mbers before at | ceeded \$1,000 during the vear, ne tax return, including all W2s, ttaching your returns, as the law and all W2s, schedules, and atta | schedules, requires th | and attachments. |
| PRIMARY SOURCES OF INCOM | Es | | | | |
| Name of Source of Income Exceeding \$1,000 Address | | | ress of Source of Income Amou | | |
| Florida Retirement System 3189 | | 3189 South Bl | \$189 South Blair Stone Road Tallahassee Florida 32301 \$150,0 | | |
| | | | 6 | -9/71 | |
| SECONDARY SOURCES OF INCO | OME (Major custo | mers, clients, e | tc. of businesses owned by repo | orting perso | n): |
| Name of Business Entity | Name of Major Sources of Business' Income | | Address of Source | Principal Business Activity of Source | |
| City of Bartow Police Department | Bartow Police Department | | 450 N Wilson Ave. Bartow Florida 33830 | Deputy Chief of Police | |
| | | 80 | Cr. | | |
| | | 1 VA | C | | |

| Interests i | in Specified Busin | esses | | |
|--------------|--------------------|-------|----|--|
| < | 0/ | .00 |)5 | |
| Business Ent | tity # 1 | | | |
| N/A | - 4 8 | 1 1 | | |
| | OV | | | |

2024 JUN 12 PM 12: 48

Signature of Reporting Official or Candidate

PALM BEACH COUNTY, FL

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Lauro Ernesto Diaz

Digitally signed: 06/11/2024