

BEFORE THE  
STATE OF FLORIDA  
COMMISSION ON ETHICS

|                        |   |                             |
|------------------------|---|-----------------------------|
| In re DENNIS WEDGWORTH | ) | Financial Disclosure Appeal |
|                        | ) | No. FD 22-022               |
| Appellant.             | ) | Final Order No. XXX         |
| _____                  | ) |                             |

FINAL ORDER

This matter came before the Commission on Ethics, meeting in public session on April 24, 2026, on the appeal of Appellant, pursuant to Section 112.3145(8)(g), Florida Statutes (2022) (subsequently redesignated to Section 112.3145(8)(f), Florida Statutes (2025)). There are no matters in dispute. Appellant did not request a hearing before the Commission.

Financial disclosure in the form of an annual CE Form 1 Statement of Financial Interests is required of certain public officials and employees because it enables the public to evaluate potential conflicts of interest, deters corruption, and increases public confidence in government. Section 112.3145(8)(f) assesses an automatic fine of \$25 per day on a person who fails to timely file a required CE Form 1 Statement of Financial Interests. The Commission may waive the fine in whole or in part for good cause shown based on "unusual circumstances" contributing to the failure to file by the designated date.

Here, Appellant served on the Board of Supervisors of the Highland Glades Water Control District, a position requiring the filing of a 2021 CE Form 1, Statement of Financial Interests, by the designated due date of July 1, 2022, with a grace period ending on September 1, 2022. §§ 112.3145(2)(b), (8)(c), Fla. Stat. (2022). Appellant filed his 2021 CE Form 1 on September 6, 2022, and has been assessed a fine of \$125 (\$25 a day for 5 days late).

Appellant alleges he did timely file his 2021 CE Form 1. However, he signed his 2021 CE Form 1 on September 5, 2022, and the envelope containing his 2021 CE Form 1 was postmarked on September 6, 2022. The amount of the fine due is based upon the earliest of the following: (1) when a statement is actually received by the office; (2) when the statement is postmarked; (3) when the certificate of mailing is dated; or (4) when the receipt from an established courier company is dated. § 112.3145(8)(f), Fla. Stat. (2022). Here, the postmark date of September 6, 2022, controls; however, September 6, 2022, was 5 days after the courtesy grace period's end. Thus, the record does not support Appellant's contention that he timely filed his 2021 CE Form 1.

Based on the foregoing facts and conclusions of law, the Commission hereby affirms the assessed fine of \$125 and dismisses the appeal. The fine shall be paid to the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709, within 30 days of the date this order is rendered, unless other payment arrangements are made by contacting Kimberly Holmes, Financial Disclosure Coordinator, at the address above or by telephone at (850) 488-7864.

ORDERED by the State of Florida Commission on Ethics meeting in public session on April 24, 2026.

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Date Rendered

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Jon M. Philipson  
*Chair, Florida Commission on Ethics*

THIS ORDER CONSTITUTES FINAL AGENCY ACTION. ANY PARTY WHO IS ADVERSELY AFFECTED BY THIS ORDER HAS THE RIGHT TO SEEK JUDICIAL REVIEW UNDER SECTION 120.68, AND SECTION 112.3241, FLORIDA STATUTES, BY FILING A NOTICE OF ADMINISTRATIVE APPEAL PURSUANT TO RULE 9.110 FLORIDA RULES OF APPELLATE PROCEDURE, WITH THE CLERK OF THE COMMISSION ON ETHICS, AT EITHER 325 JOHN KNOX ROAD, BUILDING E, SUITE 200, TALLAHASSEE, FLORIDA 32303 OR P.O. DRAWER 15709, TALLAHASSEE, FLORIDA 32317-5709; AND BY FILING A COPY OF THE NOTICE OF APPEAL

ATTACHED TO WHICH IS A CONFORMED COPY OF THE ORDER DESIGNATED IN THE NOTICE OF APPEAL ACCOMPANIED BY THE APPLICABLE FILING FEES WITH THE APPROPRIATE DISTRICT COURT OF APPEAL. THE NOTICE OF ADMINISTRATIVE APPEAL MUST BE FILED WITHIN 30 DAYS OF THE DATE THIS ORDER IS RENDERED.

JMP: sen

Dennis Wedgworth  
P.O. Bo 2076  
Belle Glade, FL 33430

NOV 21 2023

RECEIVED



# STATE OF FLORIDA COMMISSION ON ETHICS

325 John Knox Road  
Building E, Suite 200  
Tallahassee, FL 32303  
Telephone: (850) 488-7864  
Fax: (850) 488-3077  
Email: disclosure@leg.state.fl.us

## APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2021

**DIRECTIONS:** The information you provide in this form is critical for processing your appeal in a timely manner.

In Part A, please provide current contact information. If your contact information changes while your appeal is being processed, please notify us.

In Part B, please check any boxes that specify the general reason(s) for your appeal.

In Part C, please explain in detail the reason(s) for your appeal. In addition to your written explanation in Part C, you may attach any documents that support your appeal.

**IMPORTANT:** TO PRESERVE YOUR RIGHT TO APPEAL, THIS FORM OR OTHER WRITTEN APPEAL (AND ANY ATTACHMENTS) MUST BE FILED WITH (RECEIVED BY) THE COMMISSION ON ETHICS WITHIN THIRTY (30) DAYS OF THE DATE THE NOTICE OF ASSESSMENT OF AUTOMATIC FINE WAS MAILED TO YOU.

**PLEASE SEND YOUR COMPLETED FORM TO ONE OF THE FOLLOWING:**

Mailing Address: Commission on Ethics  
P.O. Drawer 15709  
Tallahassee, FL 32317-5709

Physical Address: Commission on Ethics  
325 John Knox Road  
Building E, Suite 200  
Tallahassee, FL 32303

Fax: (850) 488-3077

Email: disclosure@leg.state.fl.us

### PART A: YOUR INFORMATION

Name: Dennis Wedgworth

Address: 83643 Stainford Dr. City: Wellington State: FL Zip: 33414

Daytime Tel.: \_\_\_\_\_ Cell: 561-261-9894

Email: dennis@wedgworth.com Filer ID# (if known): \_\_\_\_\_

Public Employer: Highland Glades Water Control District

Public Position: Supervisor/Chairman

CONTINUED ON REVERSE SIDE

## PART B: GENERAL REASON(S) FOR YOUR APPEAL

Please choose any/all reasons that apply to your appeal.

I hereby appeal the Notice of Assessment of Automatic Fine on the following basis:

- a. ☐ **Sickness or injury** (Explain in Part C and attach a statement from attending physician, including dates and nature of illness or injury)
- b. ☐ **Lack of notification – Failure to receive notice** (Explain in Part C and provide documentation that supports your assertion that you never received certified mail delinquency notice: for example, incorrect address; misdelivered mail; change in employment; extended absence from home, etc.)
- c. ☒ **Claim of timely filing of financial disclosure** (Explain in Part C and provide copy of certified mail receipt and/or copy of completed form which had been previously filed, along with a sworn notarized statement that you filed prior to the deadline)
- d. ☐ **Left public position prior to December 31, 2021** (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2021)
- e. ☐ **Other unusual circumstance** (Explain in Part C and provide documentation explaining uncommon, rare, or sudden occurrence that prevented timely filing prior to deadline)
- f. ☐ **Not required to file** (Explain in Part C and provide documentation that supports reason for not required to file)

## PART C: DETAILED EXPLANATION OF YOUR APPEAL

Please provide a detailed explanation of your appeal, including why each option you selected in Part B is applicable to you. You may use the space provided and/or attach additional pages.

Filed statement in timely fashion

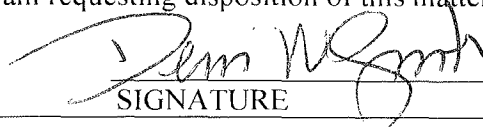
## OPTIONAL REQUEST FOR HEARING

☐ In addition to this written appeal, I specifically request to appear before the Commission in a hearing pursuant to Section 112.3144(8)(f)2 or Section 112.3145(8)(f)2, Florida Statutes. Commission meetings occur in Tallahassee.

## SIGNATURE

I have received and read the Notice of Assessment of Automatic Fine and its instructions on How to Appeal and I understand my options. I am requesting disposition of this matter as indicated.

11/15/2023  
DATE

  
SIGNATURE

FORM 1

STATEMENT OF  
FINANCIAL INTERESTS

2021

FOR OFFICE USE ONLY:

263207 - Dennis Wedgworth  
Supervisor/Chairman, Highland Glades Water Control District  
Po Box 2076  
Belle Glade, FL 33430

2021 SEP - 9 PM 1:13  
HIGHLAND GLADES WATER CONTROL DISTRICT

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

\*\*\*\* THIS SECTION MUST BE COMPLETED \*\*\*\*

## DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.

## MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

☐ COMPARATIVE (PERCENTAGE) THRESHOLDS OR ☒ DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]  
(If you have nothing to report, write "none" or "n/a")

| NAME OF SOURCE OF INCOME | SOURCE'S ADDRESS               | DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY |
|--------------------------|--------------------------------|---------------------------------------------------------|
| Wedgworth Farms, Inc.    | 651 NW 9TH ST, Belle Glade, FL | Agriculture                                             |
| Wedgworth's Inc.         | 11 33430                       | Fertilizer                                              |
|                          |                                |                                                         |
|                          |                                |                                                         |

## PART B -- SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]  
(If you have nothing to report, write "none" or "n/a")

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

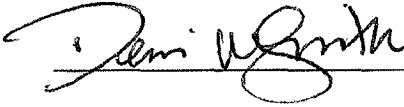
PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]  
(If you have nothing to report, write "none" or "n/a")

Wedgworth Farms: Palm Beach, Okeechobee  
Indian River, Osceola Counties  
GPB Partners, LLC Okeechobee County

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>PART D — INTANGIBLE PERSONAL PROPERTY</b> [Stocks, bonds, certificates of deposit, etc. - See instructions]<br>(If you have nothing to report, write "none" or "n/a")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                           |
| TYPE OF INTANGIBLE<br>United of Omaha Pension<br>mass mutual 401(k)<br>Morgan Stanley FIA<br>Morgan Stanley Account                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | BUSINESS ENTITY TO WHICH THE PROPERTY RELATES<br>Retirement Accounts                      |
| <b>PART E — LIABILITIES</b> [Major debts - See instructions]<br>(If you have nothing to report, write "none" or "n/a")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                           |
| NAME OF CREDITOR<br>LoanCare                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ADDRESS OF CREDITOR<br>Onslow Bay Financial, LLC<br>PO Box 8068, Virginia Beach, VA 23450 |
| <b>PART F — INTERESTS IN SPECIFIED BUSINESSES</b> [Ownership or positions in certain types of businesses - See instructions]<br>(If you have nothing to report, write "none" or "n/a")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                           |
| BUSINESS ENTITY # 1 <span style="float: right;">BUSINESS ENTITY # 2</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                           |
| NAME OF BUSINESS ENTITY<br>Bank of Belle Glade                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                           |
| ADDRESS OF BUSINESS ENTITY<br>Belle Glade, FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                           |
| PRINCIPAL BUSINESS ACTIVITY<br>Banking                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                           |
| POSITION HELD WITH ENTITY<br>Director                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                           |
| I OWN MORE THAN A 5% INTEREST IN THE BUSINESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                           |
| NATURE OF MY OWNERSHIP INTEREST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                           |
| <b>PART G — TRAINING</b> For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                           |
| <input type="checkbox"/> I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                           |
| IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                           |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;"><b><u>SIGNATURE OF FILER:</u></b></p> <p><b>Signature:</b></p>  <p><b>Date Signed:</b></p> <p>9/5/2022</p> </div> <div style="width: 50%;"> <p style="text-align: center;"><b><u>CPA or ATTORNEY SIGNATURE ONLY</u></b></p> <p>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:</p> <p>I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.</p> <p>CPA/Attorney Signature: _____</p> <p>Date Signed: _____</p> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                           |
| <b><u>FILING INSTRUCTIONS:</u></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                           |
| <p>If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.</p> <p><b>Local officers/employees</b> file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. <u>Do not email your form to the Commission on Ethics, it will be returned.</u></p> <p><b>State officers or specified state employees</b> who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. <u>Do not file by both mail and email. Choose only one filing method.</u> Form 6s will not be accepted via email.</p> <p><b>Candidates</b> file this form together with their filing papers.</p> <p><b>MULTIPLE FILING UNNECESSARY:</b> A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.</p> <p><b>WHEN TO FILE: Initially,</b> each local officer/employee, state officer, and specified state employee must file <b>within 30 days</b> of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.</p> <p><b>Candidates</b> must file at the same time they file their qualifying papers.</p> <p><b>Thereafter,</b> file by July 1 following each calendar year in which they hold their positions.</p> <p><b>Finally,</b> file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2021.</p> |                                                                                           |

Dennis Weckworth  
13643 Stamford Dr.  
Wellington, FL 33414

GREENVILLE SC 296

6 SEP 2022 PM 4 L

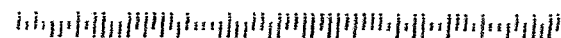


SUPERVISOR OF ELECTIONS  
SEP-9 1:13  
PALM BEACH COUNTY FL

PALM BEACH COUNTY  
SUPERVISOR OF ELECTIONS  
POST OFFICE BOX 22309  
WEST PALM BEACH, FL 33416-2309

ATTN: CANDIDATE DEPARTMENT  
FINANCIAL DISCLOSURE ENCLOSED

33416-230909



**BEFORE THE  
STATE OF FLORIDA  
COMMISSION ON ETHICS**

In re     **Dennis Wedgworth  
Supervisor/Chairman  
Board Of Supervisors  
Highland Glades Water Control District**

**PID#: 263207**

**NOTICE OF ASSESSMENT OF AUTOMATIC FINE**

The Commission on Ethics hereby gives notice of an assessment of a fine against you pursuant to Section 112.3145(8)(f), Florida Statutes, due to your failure to timely file your 2021 CE Form 1, Statement Of Financial Interests. Under the law, your 2021 CE Form 1, Statement of Financial Interests, was due by July 1, 2022. The law provided for a penalty-free grace period extending the due date to September 1, 2022. After that date, you accrued fines of \$25.00 per day for each day your financial disclosure was late, pursuant to Section 112.3145(8)(f), Florida Statutes.

Inasmuch as your 2021 CE Form 1 was filed September 6, 2022 with the Supervisor of Elections for Palm Beach County, you are fined the amount of \$125.00 (\$25.00 per day for 5 day(s) late). This fine must be paid to the Commission on Ethics within 30 days of the date of this notice unless you appeal the fine to the Commission. The Commission has the authority to consider the appeal and waive the fine in whole or in part if your failure to file on time was due to "unusual circumstances" surrounding the failure to file.

**HOW TO APPEAL**

1. Read these instructions carefully before submitting your appeal.
2. **LEGAL AUTHORITY:** Appeals are governed by Section 112.3145(8)(f)2., Florida Statutes, and Commission Rule 34-8.215, Florida Administrative Code.
3. **FORMAT:** Your appeal must be in writing and mailed to Florida Commission on Ethics, P. O. Drawer 15709, Tallahassee, FL 32317-5709, or delivered to Florida Commission on Ethics, 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303. The appeal may take the form of a letter or you may use the appeal form included in this mailing. The appeal form also is available at the Commission's website: [www.ethics.state.fl.us](http://www.ethics.state.fl.us). Click on "Financial Disclosure" and then the link to the sample appeal form.
4. **DUE DATE:** Your appeal must be received by the Commission on Ethics on or before **December 11, 2023**. **NOTE:** Failure to timely file an appeal will constitute a waiver of your right to appeal and will result in the entry of a default order against you.
5. **UNUSUAL CIRCUMSTANCES:** An appeal must demonstrate that you submitted your CE Form 1 after the extended due date because of "unusual circumstances." "Unusual circumstances" is defined in Commission Rule 34-8.215(4), Florida Administrative Code, as "uncommon, rare, or sudden events over which the reporting individual had no control and which directly result in the failure to act in accordance with the filing requirements." Therefore, circumstances that allowed for time to take steps necessary to file on time do not constitute "unusual circumstances" that will allow the Commission to waive the fine. You have the burden to establish "unusual circumstances." Your appeal must specifically state the circumstances that led to your not filing by September 1, 2022, and must include any documentation or evidence supporting your appeal, such as:
  - a. **SICKNESS/INJURY:** a statement from attending physician, including dates and nature of the illness or injury;
  - b. **LACK OF NOTICE (WRONG ADDRESS):** documentation that you did not reside at the address to which notice was sent;
  - c. **LACK OF NOTICE (ABSENCE FROM HOME):** documentation establishing the period of time of your absence covering the notification period;

- d. **CLAIM OF TIMELY FILING OF FINANCIAL DISCLOSURE:** (1) an affidavit from you attesting under oath or affirmation that you filed your financial disclosure and your recollection of when and how you filed and (2) a copy of a certified mail receipt and/or a copy of the completed form which was filed. If you have witnesses to your filing, we also will need an affidavit from each witness. **NOTE:** A claim of having filed the CE Form 1F for the current year does not satisfy the CE Form 1 filing requirement or excuse a late filing;
- e. **LEFT PUBLIC POSITION BEFORE DECEMBER 31, 2021:** confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2021; or
- f. **UNCLAIMED CERTIFIED MAIL:** if delinquency notice was addressed correctly but not received, you must explain why.
6. **YOUR RIGHT TO A HEARING:** You have the right to have your appeal heard by the Commission and to appear before the Commission at the hearing, but, to exercise this right, you must specifically request a hearing in your appeal. If you do not request a hearing, you will waive your right to a hearing, the Commission will determine the outcome of your appeal based upon the written record (including the documentation you provide and any documentation in your case file), and you will receive no further notice until after the Commission decides your appeal.

**FAILURE TO PAY FINE OR FILE APPEAL WITHIN 30 DAYS**

If you do not timely file an appeal or pay the assessed fine within 30 days of this Notice, a default order will be entered against you and the Commission will take the steps provided by law to collect the fine, including:

- Referral to the CFO of the Department of Financial Services, if you are a salaried state officer or employee, for withholding of a portion of your salary until the fine is satisfied; or
- Referral to your agency's governing body for withholding of a portion of your salary until the fine is satisfied;
- Referral to a collection agency, which can seek garnishment of your wages; and/or
- An additional civil penalty, not limited by this automatic fine, may be imposed if your disclosure statement is filed more than 60 days late and a complaint is filed against you pursuant to Section 112.324, Florida Statutes.

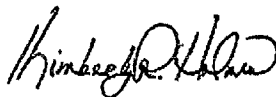
Please contact our office if you have any questions about this matter.

**CERTIFICATE OF MAILING**

I certify that a copy of the foregoing Notice of Assessment of Automatic Fine was furnished to:

**Mr Dennis Wedgworth  
Po Box 2076  
Belle Glade, FL 33430 -7076**

by Certified Mail on this Thursday, November 09, 2023.



KIMBERLY R. HOLMES  
Program Administrator

Florida Commission on Ethics  
P. O. Drawer 15709  
Tallahassee, FL 32317-5709

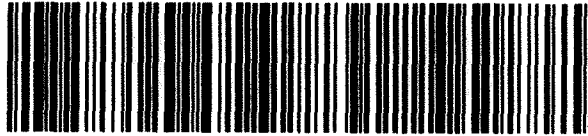
-or-

Florida Commission on Ethics  
325 John Knox Road, Building E, Ste. 200  
Tallahassee, FL 32303

Tel.: (850) 488-7864  
Fax: (850) 488-3077  
Email: disclosure@leg.state.fl.us



STATE OF FLORIDA  
COMMISSION ON ETHICS  
PO DRAWER 15709  
TALLAHASSEE, FL 32317-5709



9214 8901 0661 5400 0190 4928 10

RETURN RECEIPT (ELECTRONIC)

263207

DENNIS WEDGWORTH  
PO BOX 2076  
BELLE GLADE, FL 33430-7076

11  
URGENT - Open Immediately!

CUT / FOLD HERE

Zone 4

6X9 ENVELOPE  
CUT / FOLD HERE

CUT / FOLD HERE

## Mail Piece Details



[Print this page](#)

### Recipient Address

DENNIS WEDGWORTH  
PO BOX 2076  
BELLE GLADE, FL 33430-7076

**Record / Case Number:**  
263207

### Return Address

STATE OF FLORIDA  
COMMISSION ON ETHICS  
PO DRAWER 15709  
TALLAHASSEE, FL 32317-5709

**Entry Point ZIP:**  
32317

### Mail Piece Information

**Tracking Number:** 92148901066154000190492810

**Date Created:** 11/09/2023 03:22:32 PM

**Mail Class:** USPS First Class Mail

**Special Services:** Certified Mail  
Return Receipt Electronic

**Memo:** --

**Created By:** Kimberly Holmes - Commission on Ethics

### Signature Information

**Signed For By:** DENNIS WEDGWORTH

**Signature Status:** Not Yet Available

### Tracking Information

**Pre-Shipment, Usps Awaiting Item,** November 09, 2023, 12:00:00 AM

**Pre-Shipment Info Sent Usps Awaits Item,** November 09, 2023, 02:40:00 PM, TALLAHASSEE,FL 32317

**Arrival At Unit,** November 15, 2023, 07:51:00 AM, BELLE GLADE,FL 33430

**Available For Pickup,** November 15, 2023, 07:51:00 AM, BELLE GLADE,FL 33430

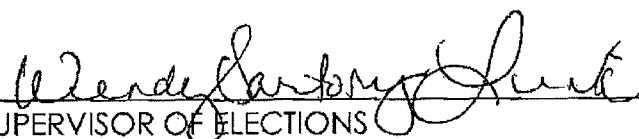
**Delivered Individual Picked Up At Po,** November 15, 2023, 10:42:00 AM, BELLE GLADE,FL 33430

**Florida Commission on Ethics  
Financial Disclosure Notification System  
Delinquency Certification (2022)**

I Wendy Sartory Link, the Supervisor of Elections of Palm Beach County, hereby certify that each person whose ID number, name, agency, and position appears above or on the attached list:

- (1) was sent a notice of the July 1, 2022 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2022;
- (2) was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2022;
- (3) was sent a delinquency notice by certified mail not later than August 1, 2022 advising him or her of the grace period in effect until September 1, 2022; and of the penalties that could be imposed as provided in Section 112.3145(8)(c), Florida Statutes; and
- (4) did not file a Form 1, Statement of Financial Interests, until the date shown or, had not filed a Form 1, Statement of Financial Interests by October 31, 2022; and further
- (5) that the date of filing shown is based upon the earliest of the following:
  - (a) when the Form 1 was actually received by my office;
  - (b) when the Form 1 was postmarked;
  - (c) when the certificate of mailing (if any) was dated; or
  - (d) when the receipt (if any) from an established courier company was dated.

Signed

  
SUPERVISOR OF ELECTIONS

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

**1. Article Addressed to:**

Dennis Wedgworth - 263207 AS  
Supervisor/Chairman, Highland Glades Water  
Control District  
P.O. Box 2076  
Belle Glade, FL 33430



9590 9402 6951 1104 0449 71

**2. Article Number (Transfer from service label)**

7021 1970 0001 0828 7524

**COMPLETE THIS SECTION ON DELIVERY****A. Signature**

- ☐ Agent  
☐ Addressee

**B. Received by (Printed Name)****C. Date of Delivery**

8/1/22

- D. Is delivery address different from item 1?** ☐ Yes  
If YES, enter delivery address below: ☐ No

**3. Service Type**

- |                                                                        |                                                                     |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Adult Signature                    | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       |                                                                     |
| <input type="checkbox"/> Insured Mail                                  |                                                                     |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |                                                                     |



## Financial Disclosure Management System

THE FLORIDA COMMISSION ON ETHICS

Filer - Fines and Appeals - PID 263207 - Mr Dennis Wedgworth

### Filer Information

### Org Membership

### Forms

### Communications

### Fines and Appeals >

### View All

### Filer Flags

[2000](#) [2001](#) [2002](#) [2003](#) [2004](#)  
[2005](#) [2006](#) [2007](#) [2008](#) [2009](#)  
[2010](#) [2011](#) [2012](#) [2013](#) [2014](#)  
[2015](#) [2016](#) [2017](#) [2018](#) [2019](#)  
[2020](#) [2021\(S\)](#) [2022](#) [2023](#)

<<2023 Form Year

### Status

Filing: ACTIVE

Fine: No Fine

### Flags

Public Address

Filing Extensions

Indefinite: None

Temporary:

None

Eligible for Fines

The filer has fines for: 2022 (Appeal)

### 2022 Fines and Appeals

| Form Year 2021 Filed Forms |           |             |                |                 |                                   |            |
|----------------------------|-----------|-------------|----------------|-----------------|-----------------------------------|------------|
| Received Date              | Form Type | Form Signed | Filed by Email | Filing Location | Updated                           | Comments   |
| 09/06/22                   | Form 1    | Yes         | No             | SOE             | HOLMESK(SOE IMPORT) on 12/02/2022 | Palm Beach |

| 2022 Fine Information                                                  |             |            |                     | Update Fine Information |                   |                         |                     |
|------------------------------------------------------------------------|-------------|------------|---------------------|-------------------------|-------------------|-------------------------|---------------------|
|                                                                        |             |            |                     | Assign Agency Contact   |                   |                         |                     |
| Fine Balance                                                           | Fine Status | Fine Date  | Original Assessment | Fine Amount             | Last Payment Date | Payment Plan Start Date | Payment Plan Amount |
| \$125.00                                                               | Appeal      | 10/12/2023 | \$125.00            | \$125.00                |                   |                         |                     |
| Fine Address Po Box 2076 Belle Glade FL 33430-7076                     |             |            |                     |                         |                   |                         |                     |
| Org/Suborg Highland Glades Water Control District-Board Of Supervisors |             |            |                     |                         |                   |                         |                     |

| 2022 Fine Payment History |             |            |        |            |                |
|---------------------------|-------------|------------|--------|------------|----------------|
| Date Posted               | Description | Amount     | Method | Payment ID | Comments       |
| 10/12/2023                | Fine Levied | + \$125.00 |        |            | Fined \$125.00 |
| Current Balance: \$125.00 |             |            |        |            |                |

 Add a New Filer

 Jump To A Filer

PID:

 Quick Filer Search

First Name:

Last Name:

## 2022 Fine Year Event

### Chronology

|  Date       | Type     | Description                | Reference                                                     |
|----------------------------------------------------------------------------------------------|----------|----------------------------|---------------------------------------------------------------|
|  08/18/2022 | Postcard | Courtesy Postcard Reminder | Print Queue:<br>8/18/2022<br>Printing Confirmed:<br>8/18/2022 |

#### Letter Sent To:

Mr Dennis Wedgworth  
Po Box 2076  
Belle Glade, FL 33430 -7076

|                                                                                             |      |                         |                                      |
|---------------------------------------------------------------------------------------------|------|-------------------------|--------------------------------------|
|  09/6/2022 | Form | Form 1 Received, Signed | Form 1 Received by<br>Palm Beach SOE |
|---------------------------------------------------------------------------------------------|------|-------------------------|--------------------------------------|

Form Received By: Palm Beach County SOE

Filing Location: Palm Beach County SOE

Record Created By: HOLMESK(SOE IMPORT) on 12/02/2022

|            |             |                |                                       |
|------------|-------------|----------------|---------------------------------------|
| 10/12/2023 | Fine Levied | Fined \$125.00 | Journal: <u>10/12/2023</u><br>2:18 PM |
|------------|-------------|----------------|---------------------------------------|

|           |                            |                     |                                      |
|-----------|----------------------------|---------------------|--------------------------------------|
| 11/9/2023 | Notice of<br>Assessed Fine | Initial Fine Notice | Journal: <u>11/9/2023</u><br>2:27 PM |
|-----------|----------------------------|---------------------|--------------------------------------|

|                                                                                               |             |                                                    |                                                                      |
|-----------------------------------------------------------------------------------------------|-------------|----------------------------------------------------|----------------------------------------------------------------------|
|  11/9/2023 | Letter Sent | Notice of Assessed Fine -<br>Filer 1st Fine Letter | Print Queue:<br><u>11/9/2023</u><br>Printing Confirmed:<br>11/9/2023 |
|-----------------------------------------------------------------------------------------------|-------------|----------------------------------------------------|----------------------------------------------------------------------|

#### Letter Sent To:

Mr Dennis Wedgworth  
Po Box 2076  
Belle Glade, FL 33430 -7076

|           |             |           |                                     |
|-----------|-------------|-----------|-------------------------------------|
| 02/7/2024 | Fine Appeal | FD 22-022 | Journal: <u>2/7/2024</u><br>5:22 PM |
|-----------|-------------|-----------|-------------------------------------|

2022 Fine Appeal –  
FD 22-022

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <div> <div>Appeal Status:</div> <div>No Hearing Requested</div> </div> <div> <div>Active</div> </div> <div> <div>Appeal Receipt</div> </div> <div> <div>Date: 11/21/2023</div> </div> <div> <div>Timely Filed: Yes</div> </div> <div> <div>Print Appeal</div> </div> <div> <div>Letter: Yes</div> </div> <div> <div>Hearing Requested:</div> <div>No</div> </div> <div> <div>Appeal Reason:</div> <div>Previously Filed</div> <div>Financial Disclosure</div> </div> <div> <div>Appeal Notes:</div> </div> <div> <div>Appeal Number: FD</div> <div>22-022</div> </div> <div> <div>Appeal Analyst</div> </div> <div> <div>Assigned:</div> </div> <div> <div>Final Order</div> </div> <div> <div>Number:</div> </div> <div> <div>Final Order Date:</div> </div> |
|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|