

BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re JUDITH S. FOX	)	Financial Disclosure Appeal No. FD 22-033
	)	
Appellant.	)	Final Order No. XXX
_____	)	

FINAL ORDER

This matter came before the Commission on Ethics, meeting in public session on October 23, 2026, on the appeal of Appellant, pursuant to Section 112.3145(8)(g), Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)) which 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" surrounding the failure to file by the designated date. There are no matters in dispute. Appellant did not request a hearing.

Findings of Fact

1. According to information provided to the Commission, Appellant served as a Member of the Lake Worth Beach Historic Resources Preservation Board, a position requiring the filing of a 2021 CE Form 1, Statement of Financial Interests. In 2022, the designated due date for submitting a 2021 CE Form 1 was July 1, 2022, with a grace period ending on September 1, 2022.
2. No later than June 1, 2022, the Palm Beach County Supervisor of Elections sent Appellant a 2021 CE Form 1.
3. No later than August 1, 2022, the Palm Beach County Supervisor of Elections sent Appellant a notice of delinquency by certified mail. This notice was sent to Appellant at 514 N Palmway, Lake Worth, FL 33460.

4. On September 13, 2022, the Commission on Ethics mailed Appellant a courtesy notice of fines accruing. This notice was sent to Appellant at the 514 N Palmway address.

5. On September 20, 2022, the Palm Beach County Supervisor of Elections received Appellant's 2021 CE Form 1.

6. On November 9, 2023, the Commission mailed Appellant a Notice of Assessed Fine. The notice was sent by certified mail to the 514 N Palmway address. It indicated the total of Appellant's accrued automatic fine was \$475 (\$25 per day for 19 days late) and provided that the Commission must receive an appeal of the fine by December 11, 2023.

7. On December 5, 2023, the Commission received Appellant's appeal of her automatic fine for Form Year 2021. In part B of her appeal form, Appellant checked "Other unusual circumstance" as the general reason for her appeal. In part C of her appeal form, where an appellant is asked to provide a detailed explanation of his or her appeal, Appellant wrote that during the time the Form was due, she was in the process of choosing a doctor for back surgery. Appellant noted that she was on bed rest for several months and was under the influence of multiple medications, including Fentanyl, during this time. Appellant explained that this caused things to get a little "mixed up." Appellant also noted that she ultimately resigned from her public position, as she could not keep up with it given her physical condition.

Conclusions of Law

8. The Commission has jurisdiction over the subject matter of this proceeding pursuant to Section 112.3145, Florida Statutes.

9. Financial disclosure is required of public officials and employees because it enables the public to evaluate potential conflicts of interest, deters corruption, and increases public confidence in government.

10. Section 112.3145(8)(g)3., Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)(2)) states:

Any reporting person may appeal or dispute a fine, based upon unusual circumstances surrounding the failure to file on the designated due date, and may request and is entitled to a hearing before the commission, which may waive the fine in whole or in part for good cause shown. Any such request must be in writing and received by the commission within 30 days after the notice of payment due is transmitted. In such a case, the reporting person must, within the 30-day period, notify the person designated to review the timeliness of reports in writing of his or her intention to bring the matter before the commission. For purposes of this subparagraph, the term "unusual circumstances" does not include the failure to monitor an e-mail account or failure to receive notice if the person has not notified the commission of a change in his or her e-mail address.

11. Pursuant to Rule 34-8.215(4), F.A.C., "unusual circumstances" means 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. Circumstances which allow for time in which to take those steps necessary to assure compliance with the filing requirements shall be deemed not to constitute unusual circumstances.

12. Here, Appellant explained that she was in poor physical condition at the time and was in the process of selecting a doctor for back surgery. Appellant noted that she was on bed rest and was on multiple different medications due to her back issues. Appellant also noted that she ultimately resigned from her public position, as she could not keep up with it given her physical condition. Therefore, considering Appellant's claims, and that there is no evidence showing otherwise, there are "unusual circumstances" here that prevented the timely filing of the financial disclosure form that justify waiving the \$475 fine.

Order

Based on the foregoing facts and conclusions of law, the Commission hereby finds that unusual circumstances for failure to timely file have been demonstrated. We therefore waive the assessed fine of \$475.

ORDERED by the State of Florida Commission on Ethics meeting in public session on October 23, 2026.

Date Rendered

Jeremy M. Rodgers
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.

JMR: aln

Judith S. Fox
514 N Palmway
Lake Worth, FL 33460



278477 22-033

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

FLORIDA
COMMISSION ON ETHICS

DEC 05 2023

RECEIVED

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: Judith S. Fox

Address: 514 N. Palmway City: Lake Worth Beach State: FL Zip: 33460

Daytime Tel.: _____ Cell: 561-253-4895

Email: judyfox@aol.com Filer ID# (if known): _____

Public Employer: Retired

Public Position: Historic Board Volunteer

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.

PLEASE SEE ATTACHED

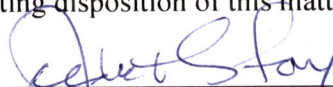
OPTIONAL REQUEST FOR HEARING

☐ 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.

9/28/23
DATE


SIGNATURE

Judith S. Fox
514 N PALMWAY
LAKE WORTH BEACH, FLORIDA 33460
561-253-4895
judisfox@aol.com

November 18, 2023

Dear Sir/Madam:

I am appealing the penalty for failure to file an assessment of automatic fine for Form 1 for the Year 2021. As a volunteer I have always filed that form but with my physical condition at that time things got a little mixed up. I was in the process of choosing a doctor to perform surgery on my back, and scared to death. All they told me was to wear a brace and take pain pills. It was all bed rest and pills for several months.

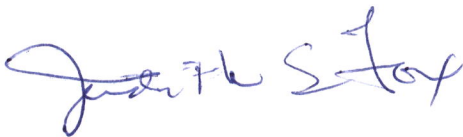
I have contacted several of these physicians but they fail to give me papers. I have attached a copy of an email I had with my attorney from a physician who wanted to operate immediately and wear a cast while I was in this situation and doped up again.

I tried to keep up my volunteer work with the historic board via Zoom but just coming out of Covid they wanted to meet. I couldn't do anything about that as I did not want to make those decisions while under the influence of Fentanyl and other drugs. In all this I failed to take care of a lot of things, you included.

I did get the operation but still use a walker or cane to get around town.

I finally accepted I could not serve my town in this capacity so I resigned in April.

As a retiree living on Social Security, I ask the board to please not require me to pay the penalty.



Judith S. Fox

-----Original Message-----

From: Robert Lithman <rpl@lithmanlaw.com>

To: judisfox@aol.com <judisfox@aol.com>

Sent: Mon, Nov 1, 2021 11:29 am

Subject: Back Brace Issue

Dear Judi:

Let me begin by saying I can empathize with your Back Pain which I know can be extremely painful and which can literally impact everything you do. If you're in pain you can't do much of anything. The pain then leads to losing sleep thus making you tired during the day and also unable to be as sharp as you might otherwise be nor, once again, allow you do the things you would normally do. Maybe you have to take certain medications to help you but this also will never be a perfect solution and is more of a band-aid. Then, unfortunately, you have to deal with something like this problem, which isn't your fault because of the pain you are dealing with and the impact it has on making certain decisions. As things keep piling on you get to the point that you just want to throw up your hands in frustration and scream, "STOP ALL THE B.S." or something to that effect. I've had to live with Crohn's since I was about 20 and fortunately things have gotten better as I got older but I recall being in such severe pain I couldn't move so, as I said, I do appreciate your situation. Lastly, my mother had very serious back problems and she was essentially living with it as you are.

I would be very happy to talk to the doctor, to send him a letter or anything else appropriate to the situation. My only real concern is a potential negative mark on your credit score or rating. That could be important to you and I don't want anything to adversely impact your credit score unless it truly makes no difference to you. Next, I am quite certain that the Doctor would never sue you for the reasons stated. It just isn't financially feasible.

In the meantime, and I mean this, don't worry about this matter as it's no big deal and no one's going to be going after you and/or file suit only to find out two years from now if they are owed anything. I hope this at least puts your mind at rest as to this matter and you shouldn't waste another minute worrying about this.

All the best, Robert

Robert Lithman, P.A.

Robert P. Lithman

1744 Ardley Road
North Palm Beach, FL 33408
305 785-3428

pm 9/20/22

FORM 1

STATEMENT OF
FINANCIAL INTERESTS

2021

FOR OFFICE USE ONLY:

Judith Fox - 278477
 Historic Resources Preservation Board
 Lake Worth Beach
 514 N Palmway
 Lake Worth, FL 33460

2022 SEP 21 AM 12:13
 FILED IN: 2022 ELECTIONS
 FILED IN: 2022 ELECTIONS

Resigned

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
medicare	USA	old - Washington

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
Judith's Fox	Accounting	514 N. Palmway LWB 33460	Accounting

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

514 N. Palmway LWB 33460

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.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]

(If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Stocks	23,468

PART E — LIABILITIES [Major debts - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
None	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]

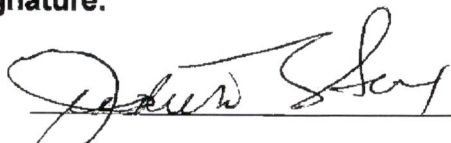
(If you have nothing to report, write "none" or "n/a")

BUSINESS ENTITY # 1

BUSINESS ENTITY # 2

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 G — TRAINING 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.

**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** ☐**SIGNATURE OF FILER:****Signature:**

Date Signed:

9/17/22

CPA or ATTORNEY SIGNATURE ONLY

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 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.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

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.

Local officers/employees 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. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees 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. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** 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.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, 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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2021.

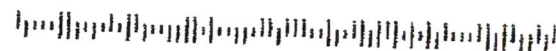
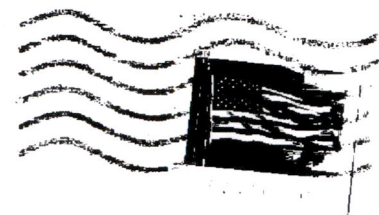
SUPERVISOR OF ELECTIONS
2022 SEP 21 AM 12:11
PALM BEACH COUNTY, FL
ATTN: CANDIDATE DEPARTMENT
FINANCIAL DISCLOSURE ENCLOSED

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

33416-230909

WEST PALM BCH FL 334

20 SEP 2022 PM 2 L



**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;

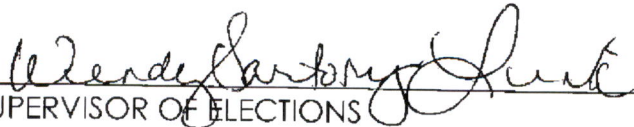
(2) was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2022;

(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

22	09/20/2022	278477	Judith Fox	Lake Worth Beach	Historic Resources Preservation Board	60	Palm Beach
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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:

Judith Fox - 278477
Historic Resources Preservation Board, Lake
Worth Beach
514 N Palmway
Lake Worth, FL 33460



9590 9402 6951 1104 0442 78

2. Article Number (Transfer from service label)

7021 1970 0001 1243 7892

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Judith Fox*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Judith Fox

C. Date of Delivery

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

3. Service Type

- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

In re **Judith Fox**
 Historic Resources Preservation Board
 Lake Worth Beach

PID#: 278477

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 20, 2022 with the Supervisor of Elections for Palm Beach County, you are fined the amount of \$475.00 (\$25.00 per day for 19 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. 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:

**Judith Fox
514 N Palmway
Lake Worth, FL 33460 -3125**

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

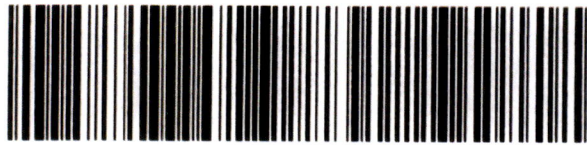
-or-

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 4925 37

RETURN RECEIPT (ELECTRONIC)

278477

JUDITH FOX
514 N PALMWAY
LAKE WORTH, FL 33460-3125

URGENT - Open Immediately!

CUT FOLD HERE

Zone 4

CUT FOLD HERE

CUT FOLD HERE

Mail Piece Details



Print this page

Recipient Address

JUDITH FOX
514 N PALMWAY
LAKE WORTH, FL 33460-3125

Record / Case Number:
278477

Return Address

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

Entry Point ZIP:
32317

Mail Piece Information

Tracking Number: 92148901066154000190492537

Date Created: 11/09/2023 03:22:15 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: JUDITH FOX

Signature Status: Available (Click Here)

Having issues viewing the signature file?

Make sure you are using the latest version of Adobe Acrobat Reader

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

Accepted At Usps Origin Facility, November 10, 2023, 11:22:00 PM, TALLAHASSEE,FL 32317

Arrived At Usps Regional Origin Facility, November 11, 2023, 12:37:00 AM

In Transit To Next Facility, Arriving On Time, November 12, 2023, 12:00:00 AM

Arrived At Usps Regional Destination Facility, November 13, 2023, 11:11:00 AM

Processed Through Usps Facility, November 13, 2023, 06:09:00 PM, WEST PALM BEACH FL DISTRIBUTION 33416

Processed Through Usps Facility, November 13, 2023, 10:09:00 PM, WEST PALM BEACH FL DISTRIBUTION 33416

Delivered Left With Individual, November 14, 2023, 12:50:00 PM, LAKE WORTH BEACH,FL 33460



November 20, 2023

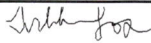
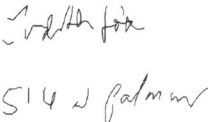
Dear MAIL MAIL:

The following is in response to your request for proof of delivery on your item with the tracking number:
9214 8901 0661 5400 0190 4925 37.

Item Details

Status:	Delivered, Left with Individual
Status Date / Time:	November 14, 2023, 12:50 pm
Location:	LAKE WORTH BEACH, FL 33460
Postal Product:	USPS Ground Advantage™
Extra Services:	Certified Mail™ Return Receipt Electronic
Recipient Name:	JUDITH FOX

Recipient Signature

Signature of Recipient:	
Address of Recipient:	

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely,
United States Postal Service®
475 L'Enfant Plaza SW
Washington, D.C. 20260-0004

The customer reference information shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

Reference ID: 92148901066154000190492537
278477
JUDITH FOX
514 N Palmway
Lake Worth, FL 33460-3125

Form Year 2021 Filed Forms

FORM TYPE	DATE SUBMITTED	FORM SIGNED	FILED BY EMAIL?	UPDATED BY	COMMENTS
Form 1	09/20/2022	No	No	HOLMESK(SOE IMPORT)	Palm Beach

Fine Year 2022 Fine Information

FINE BALANCE	STATUS	FINE DATE	ORIGINAL FINE AMOUNT	ADJUSTED FINE AMOUNT	LAST PAYMENT DATE	PAYMENT PLAN START DATE	PAYMENT PLAN AMOUNT	TOTAL PAYMENT PLAN AMOUNT DUE
\$475.00	Appeal	10/12/2023	\$475.00	\$475.00				
Fine Address: 514 N Palmway, Lake Worth, FL 33460-3125								
Email: UNKNOWN@email.com								
Org/Suborg: Lake Worth Beach - Historic Resources Preservation Board								

Fine Year 2022 Appeal Information

2022 FINE APPEAL - FD 22-033			No Hearing Scheduled		
APPEAL STATUS			Active		
APPEAL RECEIPT DATE			12/05/2023		
APPEAL TIMELY FILED			Yes		
PRINT APPEAL LETTER					
HEARING REQUESTED			No		
APPEAL REASON			Other		
APPEAL NOTES					
APPEAL NUMBER			FD 22-033		
APPEAL ANALYST ASSIGNED					
FINAL ORDER NUMBER					
FINAL ORDER DATE					

Fine Year 2022 Payment Information

DATE POSTED	DESCRIPTION	AMOUNT	METHOD	PAYMENT ID	COMMENT
10/12/2023	Fine Levied	+\$475.00			Fined \$475.00
Current Balance: \$475.00					

Fine Year 2022 Event Chronology

DATE	TYPE	DESCRIPTION	ADDRESS/EMAIL	REFERENCE
09/13/2022	Filer Correspondence Letter	Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing	514 N Palmway, Lake Worth, FL 33460-3125 UNKNOWN@email.com	KimberlyHolmes
10/12/2023	Fine Levied	Fined \$475.00		Journal: Fine Palm Beach 2023-10-12-02:18

11/09/2023	Filer Correspondence Letter	Notice of Assessed Fine - Filer 1st Fine Letter	514 N Palmway, Lake Worth, FL 33460-3125 UNKNOWN@email.com	Correspondence Queue: 2023-11-09 00:00:00 Correspondence Sent: 2023-11-09 00:00:00.0000000
11/09/2023	Notice of Assessed Fine	Initial Fine Notice		Journal: Fine1st 2023-11- 09-02:27
06/05/2024	Filer Correspondence Letter	Fine Appeal - Fine Appeal	514 N Palmway, Lake Worth, FL 33460-3125 UNKNOWN@email.com	Correspondence Queue: 2024-06-05 00:00:00 Correspondence Sent: 2024-06-05 00:00:00.0000000
06/05/2024	Fine Appeal	FD 22-033		Journal: Appeal 2024-06

Created Date: 6/5/2024

Type: Letter

Created By: System

Description: Fine Appeal - Fine Appeal

Created Date: 11/9/2023

Type: Letter

Created By: System

Description: Notice of Assessed Fine - Filer 1st Fine Letter

Created Date: 9/13/2022

Type: Letter

Created By: System

Description: Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing

Created Date: 8/18/2022

Type: Postcard

Created By: System

Description: Courtesy Postcard Reminder - Courtesy Postcard Reminder

