

**AFFIDAVIT
OF
UNDUE BURDEN
FOR MUNICIPAL CANDIDATES**

2005 SEP 12 PM 4:19

ELECTION ASSESSMENT ONLY
(Section 99.093, Florida Statutes)

I Robert S. Carr, Jr. swear
(or affirm) under oath that I intend to qualify as a candidate for the office
of City Commissioner, District 3, City of Orlando
and that I am unable to pay the ^{City is 2% or the} 1% State election assessment fee for that office
without imposing an undue burden on my personal resources or on resources
otherwise available to me.

Robert S. Carr, Jr.
Signature of Candidate

Print Name: Robert S. Carr, Jr.

STATE OF FLORIDA
COUNTY OF ORANGE

Sworn to and subscribed before me this 12th day of September 2005.

Rosemary Cople
(Signature of Notary Public)

Rosemary Cople
(Print, Type or Stamp Commissioned Name of Notary Public)

Personally Known or Produced Identification

Type of Identification Produced Florida Driver's License



Rosemary Cople
My Commission DD133245
Expires July 11, 2006

Alternative Method Affidavit

(Please Type)

OFFICE USE ONLY

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I certify that I intend to qualify by the alternative method as a candidate for the office of City Commissioner District 3, City of Orlando
(include district, circuit, group or seat numbers)

as a:

- Partisan Candidate, Member of the _____ Party
- No Party Affiliation Candidate (*formerly independent*)
- Nonpartisan Candidate (*includes judicial offices*)

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

Robert S. Carr, Jr. Robert S. Carr, Jr.
Print Name of Candidate Signature of Candidate

204 W. Spruce St. Orlando, FL 32804
Residence Address (do not use post office box)

Orlando FL 32804
City State Zip Code

(407) 425-1102 / 407-462-0230 () n/a
Day Phone Fax Number