



**REGISTRATION
POLITICAL AND CAMPAIGN SIGNS**

Name of Candidate: _____

Position Sought: _____

or

Referendum: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone No.: _____

Home Phone No.: _____

FAX No.: _____

E-mail: _____

Election Date: _____

Return to the Office of the City Clerk via one of the following:

Mail: 120 Malabar Road, SE
Palm Bay, FL 32907

FAX: 321-953-8971

E-mail: Click on the 'Submit by Email' button above