LEE COUNTY SUPERVISOR OF ELECTIONS **CANDIDATE CAMPAIGN FILE COVER SHEET**

ORIGINAL	REVISED E					
Candidate Name	Deborah Whitehood					
Residence Address	20 Emily Lane					
City and Zip Code	Fort Myes Boach, FC 33931-2933					
	Check if same as above.					
Mailing Address						
Tolonkon a Nameka dak	☑Daytime (list below) ☐Alternate (list below)					
Telephone Number(s)	(239) 463-2363 OR					
Email Address	Supermon 239 e hotmail-com					
Office Sought	Fort Myers Beach Woray District Board					
Area, District, Group or Seat #	2					
	ctions, and Special District Offices such as Community Development, Fire,					
indicate "non-partisan" on the line belo	ntrol are non-partisan offices. A candidate for any of these offices, must w.					
A candidate for a Constitutional Office or County Commission may file partisan or "No Party Affiliation" (NPA) and						
shall indicate a political party affiliation or "No Party Affiliation" on the line below.						
Political Party For Office Sought	non-partisan					
Date Of Birth						
or Voter Registration ID #	10-30-1958					
Date	10-18-14					
Candidate Signature	20-18-14 Lleborah Witchad					

All candidate-qualifying documents and campaign finance reports will be posted at the Lee County Supervisor of Elections website www.leeelections.com or use the following link: http://www.precinctfind.com/cand_lee2.html . Under Florida Law, a candidate's campaign-contact information, such as address, telephone number, and email address are available to the public. Do not hesitate to contact this office at (239) LEE-VOTE (239-533-8683) for more information about becoming a candidate for public office.

LEE COUNTY—FLORIDA AFFIDAVIT OF INTENT SPECIAL DISTRICT CANDIDATE

A special district candidate is prohibited from financing ANY PORTION OF his/her campaign with personal funds except as provided in this affidavit.

State of Florida
County of Lee

1, Deburah Whitehoad	, am a candidate for the independent special				
(print name)					
district office of:	Board,				
Furt Myes Beach	Library District 1 Seat 2				
(include district name AND district seat area or group #)					

in the November 4, 2014 General Election. I declare that my only campaign expense, from personal funds, shall be the \$25 candidate-qualifying fee OR the signature verification fee for candidates who qualify by the candidate-petition method by submitting the valid signatures of 25 registered voters residing within the District boundaries.

Provided that this is my only campaign expense, I will not be required to: appoint a campaign treasurer, designate a campaign depository or file periodic campaign treasurer's reports as required by Florida Statutes §99.061 or §106.07. I understand that I am prohibited from expending, collecting, soliciting, or accepting any money or contribution(s) in-kind, in connection with my campaign.

In the event I later decide to, collect, solicit, or accept any money or contribution(s) in-kind, or make any additional campaign expense, I understand that prior to doing so, I am required to file Form DS-DE 9 (Appointment of Campaign Treasurer/Designation of Campaign Depository Form) with the Lee County Supervisor of Elections. My campaign shall then be subject to campaign finance regulations in accordance with Florida Statutes, Chapter 106 and I will be required to file periodic campaign treasurer's reports, as required by Florida Statute §106.07, with the Lee County Supervisor of Elections.

X Mebruah Whitehood
Signature of Candidate

10-18-14
Date

FS 106.021(1)[a) "No person shall accept any contribution or make any expenditure with a view to bringing about his or her nomination, election, or retention in public office, or authorize another to accept such contributions or make such expenditure on the person's behalf, unless such person has appointed a campaign treasurer and designated a primary campaign depository.

History 2007 HB537, FS 99.061, FS 106.021 Revised-03/11/14 (Lee County Special District Forms)

STATEMENT OF CANDIDATE

OFFICE USE ONLY

VIOLUNISMOIDI ATETERAN

(Section 106.023, F.S.)
(Please print or type)

1. Deborah whitehood.				
candidate for the office of Fort Myers Beach Cubrary District Seat				
have been provided access to read and understand the requirements of				
Chapter 106, Florida Statutes.				
X Library Littlead (0-18-14 Signature of Candidate Date				

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

CANDIDATE OATH -NONPARTISAN OFFICE

'14JUN199M1151 SOE LEE COFT

(Not for use by Judicial or **School Board Candidates)**

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)						
I, DEWYOU WILL TO APPEAR ON THE BALLOT "- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)						
am a candidate for the nonpartisan office of Fort Myers Beach Library District Board.						
(clircuit #) (group or seat #) (district #) (clircuit #) (group or seat #)						
I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.						
X / Lubras whitehab (231) 463-2363 Supermom 239 e hotman Signature of Candidate Telephone Number Email Address Co						
20 Emily Lang Tout Myors Brack FC 33931-2933 Address City State ZIP Code						
Candidate's Florida Voter Registration Number (located on your voter information card): 11565422						
* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):						
STATE OF FLORIDA						
COUNTY OF						
Sworn to (or affirmed) and subscribed before me this 18th day of 2014.						
Personally Known: or						
Produced Identification: Print, Type, or Stamp Commissioned Name of Notary Public						
Type of Identification Produced: KATHERINE L FRUMOFF Notary Public - State of Florida						
DS-DE 25 (Rev. 5/11) Commission # cf 137492 Fule 1S-2.0001, F.A.C.						

FORM 1	STATEM	ENT OF		2013	
Please print or type your name, mailing address, agency name, and position belo	FINANCIAL	INTERESTS	s [FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDDI	ename: Sorah Jano				
MAILING ADDRESS:	Lane				
Fort Myers Boach F2 33931-2933 CITY: COUNTY: Lee					
NAME OF AGENCY: BOACH FORT MYERS I Lib	ray District			'T' .	
NAME OF OFFICE OR POSITION HE Fort Myers Brach	Library District B	said Sout 2			
You are not limited to the space on the lin CHECK ONLY IF CANDIDATE	or Instruction of this form. Attach additional sheets. OR NEW EMPLOYEE OR A	•			
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):					
DECEMBER 31, 2013 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: 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:					
COMPARATIVE (PI		_		THRESHOLDS	
(If you have nothing to report, write "none" or "n/a") NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE				SCRIPTION OF THE SOURCE'S	
The Walker Fring		ano Fort-Kuen	PR	A CHARGEN STANGEL	
	g Con toway	Boart. FL33431	15/1	ancial Advisor	
	OF INCOME and other sources of income to business port, write "none" or "n/a")	ses owned by the reporting per	son - S ee	instructions)	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME			PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
None	-				
PART C REAL PROPERTY [Land,		n - See instructions)	FII IN	G INSTRUCTIONS for	
(If you have nothing to report, write "none" or "n/a")			when	and where to file this are located at the bottom	
1.11.21.00			of pag		
			file th	RUCTIONS on who must is form and how to fill it egin on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY (Sto (If you have nothing to report, write "none		osit, etc See instru	ctions)		
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
none					
	14JUNI 34H 1151 SOE LEE COF1				
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
hone					
		·			
PART F — INTERESTS IN SPECIFIED BUSINESSES (C (If you have nothing to report, write "none"		Y#1	sses - See instructions) BUSINESS ENTITY # 2		
ADDRESS OF BUSINESS ENTITY	1140				
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST		/			
IF ANY OF PARTS A THROUGH F AR	E CONTINUED ON A S	EPARATE SHEE	ET, PLEASE CHECK HERE		
SIGNATURE (required):	DATE SIGNED (required):				
Lebour Whitehoo	6	6-1	8-14		
If a certified public accountant licensed under Chapte she must complete the following statement:		•	•		
I,	, prepared the CE Fo owledge and belief, the dis-	rm 1 in accordance closure herein is tr	e with Section 112.3145, Florida Statutes, and ue and correct.		
Signature			Date		
	FILING INSTRUC	ΓΙΟΝS:			
	C DCTOO 1 NO BALLOC S SAY W	7 7 W 1 1W 1			

WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE:

MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:

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

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.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E. Suite 200. Tallahassee, FL 32303.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

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 for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.