·15JAN16AM1150 SDE LEE COF1

# CANDIDATE OATH – NONPARTISAN OFFICE

SCANNED

(Not for use by Judicial or School Board Candidates)

OFFICE USE ONLY

OATH OF GANDIDATE					
OATH OF CANDIDATE (Section 99.021, Florida Statutes)					
1, DAVID Levin					
(DI FACE DRINT NAME AS VOLUMEN IT TO ADDEAD ON THE DALLOT * NAME MAY NOT BE CHANCED AFTED THE END OF	QUALIFYING)				
am a candidate for the nonpartisan office of $\frac{Village of Estero}{(office)}$ ,	(district #)				
	County, Florida;				
(circuit #); I am a qualified elector of	County, Florida,				
I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be elected; I have qualified for no other public office in the state, the term of which office or any proconcurrent with the office I seek; and I have resigned from any office from which I am required to respect to 1. Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of Florida Statutes and I will support the Constitution of the United States and the Constitution of t	art thereof runs sign pursuant to institution of the fee Estens.				
9812 Foxhall way #2 Estero FL 3392 Address State ZIF	S Code				
Candidate's Florida Voter Registration Number (located on your voter information card): 12/157	387				
* 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 <u>Lee</u>					
Sworn to (or affirmed) and subscribed before me this 16th day of January , 2015.					
Personally Known: or	$\cup$ $ $				
Produced Identification: Print, Type, or Stamp Commissioned Nan	ne of Notary Public				
Type of Identification Produced: CHERYL FUTCH  Notary Public - State of My Comm. Expires Feb.  Commission # FF 6	of Florida 22, 2018				
OF FUND	2002				



FORM 1	STATEM	IENT OF		2014	
Please print or type your name, mailing address, agency name, and position below:		INTERESTS		FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MIDE Levin David Michael	DLE NAME :		_	A A A A A A A A A A A A A A A A A A A	
MAILING ADDRESS : 9812 Foxhall Way				JAN15FM1249 SUE LEE COF	
Unit 2				(5.64)	
CITY: Estero	ZIP: COUNTY: 33928 Lee			TT   TT	
NAME OF AGENCY: Village of Estero				0 Н	
NAME OF OFFICE OR POSITION HE Village of Estero Council, Distric				,	
You are not limited to the space on the CHECK ONLY IF  CANDIDATE		·			
_					
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU YEAR OR ON A FISCAL YEAR. PL EITHER (must check one):  DECEMBER 31, 2	EASE STATE BELOW WHETHER	THE PRECEDING TAX YEAR	R, WHET THE PRE	HER BASED ON A CALENDAR CEDING TAX YEAR ENDING	
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 (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF I	NCOME [Major sources of income to port, write "none" or "n/a")	the reporting person - See inst	ructions]		
NAME OF SOURCE OF INCOME		·		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Political Precision, LLC	10051 McGregor Blvd. Ste 1	10051 McGregor Blvd. Ste 107, Ft. Myers, FL 33919 Consulti		Consulting	
• • •	OF INCOME and other sources of income to busines aport, write "none" or "n/a")	sses owned by the reporting pe	rson - See	instructions]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Political Precision, LLC	Client	2124 NE 15th Terrace, Cape Cora	4 NE 15th Terrace, Cape Coral, FL 33909 Campaign		
PART C - REAL PROPERTY [Land, I (If you have nothing to rep	buildings owned by the reporting perso port, write "none" or "n/a")	n - See instructions]		G INSTRUCTIONS for when the control of the control	
lone			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 None	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
Notice					
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "non					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
Navient	U.S. Dept. of Education Loan Servicing, P.O. Box 740351, Atlanta, GA 30374				
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	Political Pr	ecision, LLC			
ADDRESS OF BUSINESS ENTITY	10051 McGregor Blvd. Ste 107, Ft. Myers, FL 33919				
PRINCIPAL BUSINESS ACTIVITY	Consulting				
POSITION HELD WITH ENTITY	Consultant		nd Jacobs		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes				
NATURE OF MY OWNERSHIP INTEREST	Sole proprietor		SSE SE		
IF ANY OF PARTS A THROUGH F ARE	CONTINUED ON	A SEPARATE SHE	ET, PLEASE CHECK HERE		
Signature:  Date Signed:  January 15, 2015		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,			
FILING INSTRUCTIONS:					

### 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:

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

#### FILING INSTRUCTIONS:

# 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 location.

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

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 <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2014.