CANDIDATE OATH – NONPARTISAN OFFICE

(Not for use by Judicial or School Board Candidates)

'15JAN15PM0419 SOE LEE CO F1

103084880

KUPIEC, FRANK J 13073 CARDETO CT ESTERO FL 33928

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Frank J. Kupiec, III (PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BA	LLOT * NAME MAY NOT BE CHAP	NGED AFTER THE END OF QUALIFYING			
am a candidate for the nonpartisan office of Village	of Estero Council (office)	(district #)			
	(/	• *************************************			
(circuit #) (group or seat #); I am a qualified					
I am qualified under the Constitution and the Laws of elected; I have qualified for no other public office ir concurrent with the office I seek; and I have resigned Section 99.012, Florida Statutes; and I will support th State of Florida.	the state, the term of wh from any office from which	nich office or any part thereof runs I am required to resign pursuant to			
x 77/6 (239) 8	321-2963 frank@	k3re.com			
X (239) 8 Signature of Candidate Telephon	e Number	Email Address			
13073 Cardeto Court Estero	FL	33928			
Address City	State	ZIP Code			
Candidate's Florida Voter Registration Number (located					
* Please print name phonetically on the line below as y with disabilities (see instructions on page 2 of this form	you wish it to be pronounce	d on the audio ballot for persons			
with disabilities (see instructions on page 2 of this follows					
Frank J. Ku(Coo) pi(Pee) ec(Eck)					
STATE OF FLORIDA					
COUNTY OF LEE					
	15 -	Tan/ 1			
Sworn to (or affirmed) and subscribed before me this 15 day of 34 , 2015.					
Personally Known: or Produced Identification: Type of Identification Produced:	Signature of No	ris Live			

FORM 1	ST	STATEMENT OF			2014	
Please print or type your name, mailing address, agency name, and position below	w: FINAN	CIAL INT	TEREST	S	FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MII Kupiec Frank John MAILING ADDRESS : 13073 Cardeto Court	DLE NAME :			-	NI.	
CITY:	ZIP:	COUNTY:				
NAME OF AGENCY: V:llage of Estero NAME OF OFFICE OR POSITION	33928	Lee			15JAN15PM0419	
District 7 You are not limited to the space on the		additional sheets, if nec	essary.		SOE LEE CO	
CHECK ONLY IF 🗹 CANDIDAT	E OR 🔲 NEW EN	MPLOYEE OR APPOIN	ITEE		<u></u>	
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, 2014 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 (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 NAME OF SOURCE OF INCOME	eport, write "none" or "r				DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
K3RE	9990 Coc	9990 Coconut Road, Bonita Springs, FL		-	Commercial Real Estate	
	S OF INCOME , and other sources of inco report, write "none" or "i		ed by the reporting p	erson - See	e instructions]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SO OF BUSINESS' IN		ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
None						
PART C REAL PROPERTY [Land	, buildings owned by the re	eporting person - See in	nstructions]			
(If you have nothing to report, write "none" or "n/a") Massey at Ravenna Land - 1.26 acres				and v	G INSTRUCTIONS for when where to file this form are at the bottom of page 2.	
Cypress Woods Condo - Naples				INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY (Ste (If you have nothing to report, write "non		of deposit, etc See ins	tructions]		
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
None					
PART E — LIABILITIES [Major debts - See instruction: (If you have nothing to report, write "non			5/9/4		
NAME OF CREDITOR	ADDRESS OF CREDITOR				
Wells Fargo Bank	ADDRESS OF CREDITOR 420 Montgomery Street, San Francisco, CA 94104				
		· · · · · · · · · · · · · · · · · · ·	G LO		
			m		
PART F — INTERESTS IN SPECIFIED BUSINESSES [(if you have nothing to report, write "none"	or "n/a")	s in certain types of busi ENTITY # 1	nesses - See instructions]		
NAME OF BUSINESS ENTITY	None		None □		
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					
IF ANY OF PARTS A THROUGH F ARE	CONTINUED ON	A SEPARATE SHE	ET, PLEASE CHECK HERE		
SIGNATURE OF FILE	R:	CPA or ATTO	DRNEY SIGNATURE ONLY		
Signature: Date Signed:		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.			
1-14-15		CPA/Attorney Signature: Date Signed:			

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 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, 2014.