

## CANDIDATE CAMPAIGN FILE COVER SHEET

<b>                   </b>	REVISED				
Candidate Name	JAMES CHRISTOPH	IER BRANY			
Residence Address	21508 LANGHOLM RUN				
City and Zip Code	ESTERU FL 33928    Check if same as above.   Check if different from residence.				
Mailing Address	Check if same as above.	33928 GC Check if different from residence.			
Telephone Number(s)	<b>☐ Daytime (list below)</b> 239-949-065/	OR SAlternate (list below) \frac{1}{2}			
Campaign Email Address	BRANYFL@ CON	CAST. NET			
Campaign Website	N/A				
Office Sought	STUNGL BREWE COMMU	VITY DEVEWAMENT DISTRICT SEAT			
Area, District, Group or Seat #	SEAT #2				
<ul> <li>→ Judicial, School Board, Supervisor of Elections, and Special District Offices such as Community Development, Fire, Health System, Library and Mosquito Control are non-partisan offices. A candidate for any of these offices, must indicate "non-partisan" on the line below.</li> <li>→ 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.</li> </ul>					
→ Political Party for Office Sought	NUN- PARTISAN				
Date of Birth or Voter Registration ID #					
Date	10-22-1969 Jung 22-2016				
Candidate Signature	Am la	to and compaign finance reports on its website			

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website <a href="http://www.lee.vote/campaigns/candidate-packets/">www.lee.vote/campaigns/candidate-packets/</a> and <a href="http://www.lee.vote/campaigns/candidate-packets/">http://www.lee.vote/campaigns/candidate-packets/</a> and <a href="http://www.lee.vote/campaigns/candidate-finance-reports/">http://www.lee.vote/campaigns/candidate-packets/</a> and 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.

## **CANDIDATE OATH -NONPARTISAN OFFICE**

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

OFFICE USE ONLY

OATH OF CAND (Section 99.021, Florida		
I, CHRIS BRADY	ME MAY NOT BE CHANGED AFTER THE END C	
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * - NA	ME MAY NOT BE CHANGED AFTER THE END (	OF QUALIFYING)
am a candidate for the nonpartisan office of STONEYBROOK CA	MANNINY MUELLEMENT MSTUKE	,
am a candidate for the nonpartisan office of STONEYBROW Co., (group or seat #); I am a qualified elector of	(office)	(district #) _ County, Florida;
(circuit #) (group or seat #)	•	
I am qualified under the Constitution and the Laws of Florida to elected; I have qualified for no other public office in the state concurrent with the office I seek; and I have resigned from any Section 99.012, Florida Statutes; and I will support the Constitution State of Florida.	e, the term of which office or any office from which I am required to r	part thereof runs esign pursuant to
X/M/39) 9/9-0 Signature of Candidate Telephone Number	5651 BRAYFLOC	PUNCAST, MET
Signature of Candidate Telephone Number	Email Address	
21508 LAWCHUM RUN ESTERO Address City	FL State	3928 ZIP Code
Candidate's Florida Voter Registration Number (located on your vo		<del> </del>
* Please print name phonetically on the line below as you wish it with disabilities (see instructions on page 2 of this form):	to be pronounced on the audio ball	ot for persons
KRIS BRAIDEE		
STATE OF FLORIDA		
COUNTY OF LEE	. 1	
Sworn to (or affirmed) and subscribed before me this $23^{4}$		<u> 20/6</u> .
Personally Known: or	Litee	
Produced Identification:	Signature of Notary Public Print, Types or Stamp Commissioned N	lame of Notary Public
FLDL		
Type of Identification Produced:	CHERYL FUTCH Notary Public - State of F	
DS-DE 25 (Rev. 5/11)	Commission # FF 660 Bonded Through National Notal	52



# Affidavit of Intent Special District Candidates

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, JAMES CHRISTUPHER BRANY	, am a candidate for the independent special
(print name)	
district office of:	

STUNEY BRUK COMMNITY DEJKLYMENT DISTRICT SEAT #2

(include district name AND . district, seat, area or group #)

in the <u>November 8, 2016 General Election</u>. I declare that my <u>only campaign expense</u>, 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, <u>I will not be required to</u>: 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 <u>prior to doing so, I am required to file Form DS-DE 9</u> (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.

Signature of Candidate

Date

-22-16

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 HBS37, FS 99.061, FS 106.021 Revised-10/09/16 (Lee County Special District Forms)



Canvassing Board Meetings and Logic and Accuracy Testing Schedule
Sharon L. Harrington, Supervisor of Elections

(239) LEE-VOTE (533-8683)

#### Primary Election August 30, 2016

Saturday, August 20, 2016 THROUGH Saturday, August 27, 2016

(Including Sundoy, August 21, 2016)

10:00 a.m. to 7:00 p.m.

BONITA SPRINGS—ELECTIONS OFFECT
19937'S IMMANM FIR., 110, BONITA SPRINGS
CAPL COMA. PLECTIONS OFFECT
19938'S IMMANM FIR., 101, BONITA SPRINGS
CAPL COMA. PLECTIONS OFFECT
19938'S IMMANM FIR., 103, BONITA SPRINGS
19948'S IMMANM FIR., 103, BONIT

i, Sharon L. Harrington, Supervisor of Elections for Lee County, Florids sto hereby give official notice of the Conversing Board Meetings and Logic and Accuracy Testing Schedule as follows:

원수(원	F 148	ENERS.	JOHAN GIT	2011056	
08-17-16 Wednesday	9 00 AM	logic and accuracy testing	Lee County Election Center 13180 S Cleveland Ave., Fort Myers	Test, by a random method of selection, the voting machines to be used in the election during early voting and at the precincts on Election Day.	
08-17-16 Wednesday	immediately following	test vote by mail ballot tabulators initial carvass of the vote-by- mail ballots received to date	Lee County Elections Office Constitutional Complex 2480 Thompson St., Fort Myers	Test the vote-by-mail ballot tabulating equipment to be used in the election and initial canvass of the vote-by-mail ballots received to date.	
08-25-16	Thursday at 9 00 AM		Lee County Elections Office		
08-29-16 Monday at 3:00 PM		review of vote-by-mail ballots	Constitutional Complex 2480 Thompson St., Fort Myers	Review of vote-by-mail ballots.	
08-30-16 Election Day	400 PM	review of vote by-mail ballots  receive "unofficial" election night results	Lee County Elections Office Constitutional Complex 2480 Thompson St., Fort Myers	Review of vote-by-mail ballots and receive "unofficial" election right results.	
09-02-16 friday	100 PM	canvass of provisional ballots certification of the election	Lee County Elections Office Constitutional Complex 2430 Thompson St., Fort Myers	Canvass of provisional ballots, if any Official certification of the election. Canvassing Board to randomly select a race and precinct(s) to be audited in the post-election manual audit.	
09-07 16 Wednesday	9 00 AM	post election manual audit	Lee County Elections Office Constitutional Complex 2420 Thompson St., Fort Myers	Post-election manual audit. The results will be announced immediately following the completion of the post-election manual audit.	

ELECTIONS

#### Canvassing Board Meetings and Logic and Accuracy Testing Schedule Sharon L Harrington, Supervisor of Elections

(239) LEE-VOTE (533-8683)

## General Election November 8, 2016

	Carly Voting Sche Dates, Fire	dule and fr is and tocal	
Мо	onday, October 24, 2016 through Saturday, No 10:00 a.m	vember 5, 20 n. to 7:00 p.r	
	BONITA SPRINGS—ELECTIONS OFFICE 25987 S. TAMIAMI TRL., #105, BONITA SPRINGS	٤	LEE COUNTY ELECTIONS CENTER 13180 S. CLEVELAND AVE., FORT MYERS
	CAPE CORAL — ELECTIONS OFFICE 1039 SE 9TH AVE , CAPE CORAL	,	NORTH FORT MYERS RECREATION CENTER 2021 N. TAMIAMI TRL., N. FORT MYERS
	CAPE CORAL-LEE COUNTY LIBRARY 921 SW 39TH TER., CAPE CORAL	3	NORTHWEST REGIONAL LIBRARY 519 CHIQUITA BLVD. N., CAPE CORAL
	EAST COUNTY REGIONAL LIBRARY 881 GUNNERY RD , LEHIGH ACRES	9	SCHANDLER HALL COMMUNITY PARK 419 ROYAL PALM PARK RD., FORT MYERS
	ESTERO RECREATION CENTER 9200 CORKSCREW PALMS BLVD., ESTERO	10	VETERANS PARK RECREATION CENTER 55 SOUTH HOMESTEAD RD , LEHIGH ACRES

I, Sharon L, Harrington, Supervisor of Elections for Lee County, Florida do hereby give official notice of the Canassins Board Meetings and Locic and Accuracy Testing Schedule as follows:

DATE	1005	EVEN:	(CLASICH	PURFOSE
10-19-16 Wednesday	700 AM	logic and accuracy testing	Lee County Election Center 13180 S Cieveland Ave., Fort Myers	Test, by a random method of selection, the voting machines to be used in the election during early voting and at the precincts on Election Day.
10-19-16 Wednesday	immediately following	test vote by mail ballot tabulators	Lee County Elections Office Constitutional Complex 2480 Thompson St., Fort Myers	Test the vote-by-mail ballot tabulating equipment to be used in the election.
10-26-16 Wednesday	900 AM	initial carriers of the vote-by-mail ballots received to date	Lee County Elections Office Constitutional Complex 2480 Thompson St., Fort Myers	Initial Cansess the vote-by-mail ballots received to date for the election.
10-28-16	Friday at 9:00 AM		Lee County Elections Office	
11-03-16 11-07-16	Thursday at 9:00 AM Monday at 2:00 PM	review of vote-by-mail ballots	Constitutional Complex 2480 Thompson St., Fort Myers	Review of vote-by-mail ballots.
11-08-16 Tuesday Election Day	4 00 PM	review of vote-by-mail ballots receive "unofficial" election right results	Lee County Elections Office Constitutional Complex 2480 Thompson St., Fort Myers	Review of vote-by-mail ballots and receive "unofficial" election night results.
11-11-16 Friday	3 00 PM	canvass of provisional ballots canvass of write-in votes	Lee County Elections Office Constitutional Complex 2480 Thompson St., Fort Myers	Canvass of provisional ballots, if any Canvass of write in votes.
11-18-16 Friday	9:00 AM	canvass and count overseas vote by mad ballots certification of the election	Lee County Elections Office Constitutional Complex 2430 Thompson St., Fort Myers	Canvass and count overseas vote by med ballots. Official certification of the election. Canvassing Board to randomly select a race and precinct(s) to be audited in the post-election manual audit.
11-21-16 Monday	9 00 AM	post election manual audit	tee County Elections Office Constitutional Complex 2430 Thompson St., Fort Myers	Post-election manual audit. The results will be announced immediately following the completion of the post election manual audit.

I have received a copy of the Canvassing Board Meetings and Logic and Accuracy Testing Schedules for the August 30, 2016 Primary Election and the November 8, 2016 General Election. I understand that I can access OR receive a copy of these schedules at the

Lee County Supervisor of Elections website www.lee.vote or by calling (239) LEE-VOTE (533-8683).

Candidate Signatures

Print Name:

AMIR BRASY

**Date Signed** 

-77-16

FORM 1	STATEM	ENT OF	2015		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDDLE BRANY DAMES (	NAME: CARKTUPALA				
MAILING ADDRESS :	HUM RUN				
	ZID COUNTY.	77.00			7. ¥
ESTERO FL	ZIP: COUNTY: 33928	£Ε			
NAME OF AGENCY:	OR COUCUT				2. T
NAME OF OFFICE OR POSITION HELD SYUNGSBRUCKE COMPUNITY DE		Star#2		•	œ œ
You are not limited to the space on the lin				· -	2
CHECK ONLY IF X CANDIDATE	OR NEW EMPLOYEE OR	APPOINTEE	ny sitema nataona		
**** <u>BOTH</u>	PARTS OF THIS SECT	ION MUST BE CO	MPLET	ED ****	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUF YEAR OR ON A FISCAL YEAR. PLE EITHER (must check one):	R FINANCIAL INTERESTS FOR T ASE STATE BELOW WHETHER	THE PRECEDING TAX YEA THIS STATEMENT IS FOR	R, WHETH THE PRE	IER BASED ON A CALENDAR CEDING TAX YEAR ENDING	
DECEMBER 31, 20	15 <u>OR</u> 🗅 SPECIF	TY TAX YEAR IF OTHER TH	AN THE C	ALENDAR YEAR:	
MANNER OF CALCULATING REP FILERS HAVE THE OPTION OF USIN CALCULATIONS, OR USING COMPA for further details). CHECK THE ONE	IG REPORTING THRESHOLDS T ARATIVE THRESHOLDS, WHICH	ARE USUALLY BASED OF	_AR VALU I PERCEN	ES, WHICH REQUIRES FEWEF	2
-	ERCENTAGE) THRESHOLDS		AR VALL	E THRESHOLDS	
PART A PRIMARY SOURCES OF IN	COME [Major sources of income to	the reporting person - See ins	ructions]		r chara
(If you have nothing to repo	ort, write "none" or "n/a")				
NAME OF SOURCE OF INCOME		JRCE'S DRESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	_]
LIVINISTON INTERNATION	NAL JUTUU CIVIC CE	NTER DR	INTES	VARICUM TRADE CONF	11/1
	SUITE 500				_
	SOUMFIGEN, M	1 48076			-
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PART B — SECONDARY SOURCES O [Major customers, clients, ar (If you have nothing to rep	nd other sources of income to busine	sses owned by the reporting p	erson - See	instructions]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
1/A					_
					_
a a managana managana pamana a managana a ma	Congression and the Control of the C	Note the second	artanan edule e	THE DESCRIPTION OF THE PROPERTY OF THE PROPERT	44.45a
PART C REAL PROPERTY [Land, but (If you have nothing to repo	ort, write "none" or "n/a")		and w	G INSTRUCTIONS for when the state of the sta	
21710 BRIXHAM RUN LOUP ESTERO, FL 33928			INSTRUCTIONS on who must file this form and how to fill it out		,
			H hogin	on page 3.	4

PART D — INTANGIBLE PERSONAL PROPERTY [S (If you have nothing to report, write "no	tocks, bonds, certificates	of deposit, etc See instru	ctions]			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
TOWNSHIP YOUR						
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "not	•					
NAME OF CREDITOR		ADDRESS (	OF CREDITOR			
5th/3RD BANK	CINCINNATI	I OH				
				4 faci		
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none	e" or "n/a")	s in certain types of busine		ructions]		
ADDRESS OF BUSINESS ENTITY				Ī		
PRINCIPAL BUSINESS ACTIVITY	<del>                                     </del>					
POSITION HELD WITH ENTITY				T		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST						
PART G — TRAINING For elected municipal officers required to complete ar  I CERTIFY THAT I				NING.		
IF ANY OF PARTS A THROUGH G ARI	E CONTINUED ON A	A SEPARATE SHEET,	PLEASE C	HECK HERE 🔲		
SIGNATURE OF FILE	R:	CPA or ATTOR				
Signature:   Am Am Mon  Date Signed:  6-27-16		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.  CPA/Attorney Signature:  Date Signed:				
A CONTRACTOR OF THE PARTY OF TH	FILING INSTRU	CTIONS:	The second of th			
WHAT TO FILE: WH	HERE TO FILE:	WH	IEN TO FILE	<b>:</b> :		

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 file a copy of his or her 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.

Facsimiles will not be accepted.

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 page 3 of instructions.

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 must file at the same time they file their qualifying papers.

**Thereafter**, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2015.