

CANDIDATE CAMPAIGN FILE COVER SHEET

DEVISED

VORIGINAL			
Candidate Name	Steven Barbosa		
Residence Address	15851 Dorth	CR, Pt. MYERS FL. 33908	
City and Zip Code	For Myers	33908	
	Check if same as above.	Check if different from residence.	
Mailing Address			
	_		
Talambara Niumbar(a)	Daytime (list below)	OR Alternate (list below)	
Telephone Number(s)	239-980-1060	239-936-6970	
Campaign Email Address	Steve @ parkway printing. 62		
Campaign Website			
Office Sought	I ont McGreg	on Fire District	
Area, District, Group or Seat #	5	1	
 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. 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. 			
	arty Armiation on the line below.		
→ Political Party for Office Sought			
Date of Birth or Voter Registration ID #	9/29/59		
Date	6/19/18		
Candidate Signature	Steves Bar	levas	

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

33008

CANDIDATE OATH –	
NONPARTISAN OFFICE	
(Do not use this form if a Judicial or School Board Candidate)	910
Check box only if you are seeking to qualify as a write-in candidate:	,
☐ Write-in candidate	OFFICE USE ONLY
0	rati para para
	ate Oath
I, Steven Banbosa	(a), Florida Statutes)
hyphen, check box . (See page 2 - Compound Last I Although a write-in candidate's name is not printed on the	If your last name consists of two or more names but has no Names). No change can be made after the end of qualifying. ballot, the name must be printed above for oath purposes.)
am a candidate for the nonpartisan office of	McGregor Fire District, (District #)
, ; I am a qualified elector of	County, Florida;
(Circuit #) (Group or Seat #)	Outry, i lorida,
I am qualified under the Constitution and the Laws of Florida t	o 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	f which office or any part thereof runs concurrent with the office
I seek; and I have resigned from any office from which I am r	equired 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.
Candidate's Florida Voter Registration Number (located on y	our voter information card): 111486082
	on the line below as you wish it to be pronounced on the audions on page 2 of this form): [Not applicable to write-in candidates.]
X Stro Burlevan (239) 980	1060 Steve @pankway printing
Signature of Candidate Telephone Number	Email Address
15851 Dorth circle Ft. My.	en, FL, 33908
Address City	State ZIP Code
STATE OF FLORIDA	Signature of Notary Public
COUNTY OF LEE	Print Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me this	CHERYL FUTCH
day of JUNE , 20/8.	MY COMMISSION # GG 154203 EXPIRES: February 22, 2022
Personally Known: or Produced Identification: X	Bonded Thru Notary Public Underwriters
Type of Identification Produced:	



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, Steven	Banbase (print name)	, am a c	andidate for the indepe	endent special
district office of:		_	۸.	Č
IONA	McGregor	Fire	District	Seat 5
(include district name AND .district, seat, area or group #)				

in the <u>November 6, 2018, 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, 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 <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

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-11/06/17 (Lee County Special District Forms)

FORM 1

STATEMENT OF

2	N	1	7
	v		•

Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	F	OR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDI Barbosa Steven	ENAME: David			
MAILING ADDRESS: 1585(Dorth	CR,			
CITY:	ZIP: 33408 COUNTY:			
PA, Myers		e-e		
NAME OF OFFICE OR POSITION HE				
IONA McGnegon F.	ine District Sea	¥ 5		
You are not limited to the space on the li	nes on this form. Attach additional she	•		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU YEAR OR ON A FISCAL YEAR. PLI EITHER (must check one):	EASE STATE BELOW WHETHER	THE PRECEDING TAX YEAR THIS STATEMENT IS FOR	R, WHETHER THE PRECED	R BASED ON A CALENDAR DING TAX YEAR ENDING
MANNER OF CALCULATING REI FILERS HAVE THE OPTION OF USI CALCULATIONS, OR USING COMP	PORTABLE INTERESTS: NG REPORTING THRESHOLDS THRESHOLDS, WHICH	ARE USUALLY BASED ON	AR VALUES,	, WHICH REQUIRES FEWER
for further details). CHECK THE ON COMPARATIVE (P	E YOU ARE USING (must check ERCENTAGE) THRESHOLDS		AR VALUE T	THRESHOLDS
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PART D — INTANGIBLE PERSONAL PROPERTY [Stock (If you have nothing to report, write "none"	or "n/a")			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
	More			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none"	or "n/a")			
NAME OF CREDITOR	ADDRE	SS OF CREDITOR		
	More			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Overline] (If you have nothing to report, write "none" o	wnership or positions in certain types of bu	sinesses - See instructions]		
(if you have nothing to report, write none o	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2		
NAME OF BUSINESS ENTITY	- Non			
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY	- None			
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	ss More			
NATURE OF MY OWNERSHIP INTEREST				
PART G — TRAINING For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S. I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.				
IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE OF FILER	CPA or ATT	ORNEY SIGNATURE ONLY		
Signature:	in good standing with she must complete the l,	the Florida Bar prepared this form for you, he or e following statement: , prepared the CE with Section 112.3145, Florida Statutes, and the n. Upon my reasonable knowledge and belief, the		
Date Signed: 6/19//8		disclosure herein is true and correct. CPA/Attorney Signature: Date Signed:		
FILING INSTRUCTIONS:				

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

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

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 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, 2017.