FORM 6 FULLAND PUBL	IC DISCLOSURE	2019		
Please print or type your name, mailing address, agency name, and position below: OF FINANCIA	L INTERESTS F	OR OFFICE USE ONLY:		
LAST NAME — FIRST NAME — MIDDLE NAME:	The state of the s			
MICHAGL (COACH RAY)" QUALLS				
MAILING ADDRESS:				
MAILING ADDRESS: 3049 CLEVELAIN AVE				
SUTE 249 CITY: ZIP: COUNTY: FORT 1745 33907 LEE NAME OF AGENCY:				
CITY: ZIP: COUNTY:				
FORT 17YERS 33907 LEE				
NAME OF AGENCY:				
NAME OF OFFICE OR POSITION HELD OR SOUGHT:				
LEE COUNTY SHELTER	TO THE PARTY OF TH			
CHECK IF THIS IS A FILING BY A CANDIDATE				
PARTA NE	ET WORTH			
Please enter the value of your net worth as of December 31,		. Net worth is not cal-		
culated by subtracting your reported liabilities from your report	rted assets, so please see the instru	ictions on page 3.1		
		ii 50 (50)		
My net worth as of Miny 26, 20	$\frac{20}{20}$ was \$ $\frac{37}{39}$, $\frac{39}{39}$,	8		
		1. (1. m) 1. (1.		
PART B ASSETS				
HOUSEHOLD GOODS AND PERSONAL EFFECTS:				
Household goods and personal effects may be reported in a lump sum if following, if not held for investment purposes: jewelry; collections of star	mps, guns, and numismatic items; art object	s category includes any of the cts; household equipment and		
furnishings; clothing; other household items; and vehicles for personal use	e, whether owned or leased.	7		
The aggregate value of my household goods and personal effects (describ	ped above) is \$			
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:				
DESCRIPTION OF ASSET (specific description is requi	red - see instructions p.4)	VALUE OF ASSET		
4009E		\$204,000		
C19R		\$65,000		
BANK	And interest index of the second seco	\$ 100, 514,22		
	91 (93)			
	1505.25	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	ABILITIES			
LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4): NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY		
BANK OF ATERICA PO BOX 45144 TACKSONVELLE 1	FL 33271 (CAR)	145,995		
ALL IN ONE CREDIT UNEON JUI N. MALEVELLE WIE	\$ 27,000			
SUNCOAST CREAT UNTON PO BOX 1/904 TAIN	F11,958			
CENTINA LLUBB CORP. 599 MARKET ST. SVED	FP. 867			
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:	E 200, SANIFAAN 09. 94105			
NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY			
LUAN CARE ILC 3637 GENTARA WAY VI	1139,244			
t				

THE TAX NOTE THE REPORT OF A PERSON LISTS OF CONTRACT PROPERTY AND A PERSON AND A P	AND DESCRIPTION OF THE PERSON	-		THE RESERVE OF THE PROPERTY OF THE PERSON NAMED IN	AND DESCRIPTION OF THE PERSON NAMED OF THE PER	TOTAL PROPERTY OF THE PROPERTY
PART D INCOME						
Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2019 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.						
l elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments. [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]						
PRIMARY SOURCES OF INCO		ige 5):	TOTAL OF COURCE	"ICOME		
NAME OF SOURCE OF INC	OME EXCEEDING \$1,000	A Call	ADDRESS OF SOURCE		~~	AMOUNT
FRS		PV 150X	785027 ORUANA	1 PC 318	10	7109,906,02

SECONDARY SOURCES OF I	NCOME [Major customers, cli	ents, etc., of b	usinesses owned by report	ting personser	e instruction	ns on page 5]:
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES ADDRESS PRINCIPAL BUSINESS			PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
MOLK NOW HAND WE COPE	HARI CLIENTS		JUHY CLEVELANIN	1 AF	GIFE	7
	1			6 200 400		- Higher C
ľ	PART E INTERESTS IN	N SPECIEIE	ID RUSINESSES (Instr	motions on no	270.61	
5	BUSINESS ENTITY		BUSINESS ENTITY #			IESS ENTITY # 3
NAME OF BUSINESS ENTITY						200 211717 17 0
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						
		PART F -	TRAINING			
For office	rs required to complete			to section 1'	12.3142,	F.S.
For officers required to complete annual ethics training pursuant to section 112.3142, F.S. I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.						
O.A	ATH		OF FLORIDA		· // · · · · · · · · · · · · · · · ·	
I, the person whose name app			Try OF Ale	eribed before m	c by mean	n af
I, the person whose name appears at the Sworn o (or affirmed) and subscribed before me by means of beginning of this form, do depose on oath or affirmation day of						
and any that the information dischard on this face						
and any attachments the BARTLEY GOODEN 8. Goodw.						
and complete.						
Commission # GG 909139 New Commission Expires						
August 29, 2023 Print, Type, or Stamp Commissioned Name of Notary Public)						
SIGNATURE OF REPORTING	SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE Personally Known OR Produced Identification				ation	
Olonalotator nel ontino	OFFICIAL ON CANDIDATE	Туре о	of Identification Produced _	Driver	Licens	je.
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 6 in accordance with Art. II, Sec. 8, Florida Constitution,						
Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.						
Cinnatus						
Signature Date Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.						
IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						

CANDIDATE OATH -	,50WAX5,4440105.20F Fee Co. L.			
STATE AND LOCAL PARTISAN OFFICE	<u> </u>			
Check applicable one:				
Candidate with party affiliation				
∑ Candidate with no party affiliation				
Write-in candidate				
	OFFICE USE ONLY			
(Section 99.02 I, MICHAEL	didate Oath (1(1)(a), Florida Statutes) (FUALLS) (ot. If your last name consists of two or more names but has no last Names). No change can be made after the end of qualifying.			
Although a write-in candidate's name is not printed or	the ballot, the name must be printed above for oath purposes.)			
am a candidate for the office of LEE COUNTY	1			
·	Office) (District #) (Circuit #) County, Florida; I am qualified			
(Group or Seat #)	Obanty, Florida, Fam quamica			
	ffice to which I desire to be nominated or elected; I have qualified for			
	or any part thereof runs concurrent with the office I seek; and I have a pursuant to Section 99.012, Florida Statutes; and I will support the			
Constitution of the United States and the Constitution of the				
_				
	nent of Party 1(1)(b), Florida Statutes)			
(Complete Statement of Party only if you are seeking to qu	· · · · · · · · · · · · · · · · · · ·			
	ding the general election for which I seek to qualify; and I have paid			
the assessment levied against me, if any, as a candidate for	said office by the executive committee of the political party, of which			
l am a member.				
Candidate's Florida Voter Registration Number (located	on your voter information card): 12096/557			
Phonetic spelling for audio ballot: Print name phonetical ballot as may be used by persons with disabilities (see instruMETKAWL KOCH RAT KHWA	ally on the line below as you wish it to be pronounced on the audio actions on page 2 of this form): [Not applicable to write-in candidates.]			
X /20 (239) 478	1933 COALLRAYFORLDESHERIFFE GMAL, LOT			
Signature of Candidate Telephone Number 7049 CLEVELIAM PUE FORT MINES	FL Email Address 9390/			
Address City	State ZIP Code			
STATE OF FLORIDA COUNTY OF L<<	Signature of Notary Public			
	P(int, Type, or Stamp Commissioned Name of Notary Public below:			
online _ presence this 2) TH day of ///// , 20 20	Notary Public State of Florida Jerry Brian Von Gruben My Commission GG 955781 Expires 02/05/2024			
Personally Known: or Produced Identification: Type of Identification Produced: _FL	£			



Tommy Doyle Supervisor of Elections (239) LEE-VOTE (533-8683) • www.lee.vote

Canvassing Board Meeting Dates - August 18, 2020, Primary Election

Initial Canvass of Vote-by-Mail Ballots:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Monday, 07-27-20 at 9 AM

Logic and Accuracy Testing of the Tabulating Equipment or Voting Machines used at Early Voting and Election Day Precincts, and the Tabulating Equipment used for Vote-by-Mail Ballots:

Lee County Elections Center, 13180 S. Cleveland Ave., Fort Myers, 33907

Wednesday, 07-29-20 at 9 AM – Immediately Following Proceed to the Main Office (see below)

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Wednesday, 07-29-20

Review of Vote-by-Mail Ballots:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

- 9 AM Each Meeting (see below)
- Friday, 07-31-20 Monday, 08-03-20 Wednesday, 08-05-20 Friday, 08-07-20
- Monday, 08-10-20 Wednesday, 08-12-20 Friday, 08-14-20 Monday, 08-17-20

Election Day

Review of Vote-by-Mail Ballots and Receive Preliminary Election Night Results:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

- Tuesday, 08-18-20
 - o NOON, 4 PM, and 6 PM until finished

Canvass of Provisional Ballots, Review of Vote-by-Mail Ballots, Submit 1st Unofficial Results, Submit Official Results, Certify the Election, Submit Conduct of Election Report, Random Selection of Race and Precinct(s) for the Post-Election Manual Audit:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Friday, 08-21-20 at 8 AM

Post-Election Manual Audit:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Wednesday, 08-26-20 at 9 AM

In the event of a machine or manual recount, the additional dates of 08-22-20 through 08-25-20 will apply.

Canvassing Board Meeting Dates - November 3, 2020, General Election

Logic and Accuracy Testing of the Tabulating Equipment or Voting Machines used at Early Voting and Election Day Precincts, the Tabulating Equipment used for Vote-by-Mail Ballots, and the Initial Canvass of Vote-by-Mail Ballots:

Lee County Elections Center, 13180 S. Cleveland Ave., Fort Myers, 33907

Monday, 10-12-20 at 9 AM – Immediately Following Proceed to the Main Office (see below)

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Monday, 10-12-20

Review of Vote-by-Mail Ballots:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

- 9 AM Each Meeting (see below)
- Wednesday, 10-14-20 Friday, 10-16-20 Monday, 10-19-20
- Wednesday, 10-21-20 Friday, 10-23-20 Monday, 10-26-20
- Wednesday, 10-28-20 Friday, 10-30-20 Monday, 11-02-20

Election Day

Review of Vote-by-Mail Ballots and Receive Preliminary Election Night Results:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Tuesday, 11-03-20

o 9 AM, NOON, 3 PM, and 5 PM until finished

Canvass of Provisional Ballots, Review of Vote-by-Mail Ballots, Submit 1st Unofficial Results:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Friday, 11-06-20 at 2 PM

Canvass of Overseas Vote-by-Mail Ballots, Submit Official Results, Certify the Election, Submit Conduct of Election Report, Random Selection of Race and Precinct(s) for the Post-Election Manual Audit:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Friday, 11-13-20 at NOON

Post-Election Manual Audit:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Wednesday, 11-18-20 at 9 AM

In the event of a machine or manual recount, the additional dates of 11-08-20 through 11-14-20 will apply.