CANDIDATE OATH -	
STATE AND LOCAL PARTISAN OFFICE	
Check applicable one:	
Candidate with party affiliation	
Candidate with no party affiliation	
☐ Write-in candidate	
Candi	date Oath
	1)(a), Florida Statutes)
	Branning
hyphen, check box . (See page 2 - Compound Last	If your last name consists of two or more names but has no Names). No change can be made after the end of qualifying. he ballot, the name must be printed above for oath purposes.)
am a candidate for the office of Lee County Tax	(Circuit #)
; I am a qualified elector of	
(Group or Seat #)	County, Florida; I am qualified
	ce to which I desire to be nominated or elected; I have qualified for
	any part thereof runs concurrent with the office I seek; and I have
	ursuant to Section 99.012, Florida Statutes; and I will support the
Constitution of the United States and the Constitution of the S	
	ent of Party  I)(b), Florida Statutes)
(Complete Statement of Party only if you are seeking to quali	fy for nomination as a party candidate.)
am a member of the Republican	Party; I have not been a registered member of any other political
party for 365 days before the beginning of qualifying preceding	ng the general election for which I seek to qualify; and I have paid
	aid office by the executive committee of the political party, of which
am a member.	
Candidate's Florida Voter Registration Number (located on	your voter information card): 111442679
Phonetic spelling for audio ballot: Print name phonetically ballot as may be used by persons with disabilities (see instruct  NOL-EN   Brann-	on the line below as you wish it to be pronounced on the audio ions on page 2 of this form): [Not applicable to write-in candidates.] $EEN \theta_1$
X ( Moll Branger (239) 980 - 2	
Signature of Candidate Telephone Number	Email Address
Address City Fort Myer	State ZIP Code
STATE OF FLORIDA	Lenica L. Derlegus
COUNTY OF	Signature of Notary Public  Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by physical $\int$ or	\$*************************************
online _ presence this 25 th day of May , 20 20 .	Notary Public State of Florida Jessica L Dunleavy
Personally Known: or Produced Identification: Type of Identification Produced:	My Commission GG 955730 Expires 03/12/2024

FORM 6	<b>FULL AN</b>	ID PUBLIC DI	SCLOSURE	2019
Please print or type your name, mailing address, agency name, and position below:	OF FII	NANCIAL INT	TERESTS [	FOR OFFICE USE ONLY:
LAST NAME — FIRST NAME — MIDD Branning Rita MAILING ADDRESS: 1375 Jackson St.	LE NAME:	Noelle		
Ste 202				
CITY: Ft Myers NAME OF AGENCY:	ZIP: 33901	COUNTY: Lee		స్ట
NAME OF OFFICE OR POSITION HEL Lee County Tax Collector	D OR SOUGHT :			20JUN05PM040
CHECK IF THIS IS A FILING BY A CAI	NDIDATE 🗹			940
Please enter the value of your not culated by subtracting your $reportsite reportsite$ My net worth as of $rac{Ma}{2}$	rtea nabilities ir	PART A – NET WOR' December 31, 2019 or rom your <i>reported</i> asse	a more current date. ts, so please see the	[Note: Net worth is not cal-® e instructions on page 3.]
	ts may be reported purposes: jewelry; items; and vehicle d goods and persor	collections of stamps, guns, ss for personal use, whether	egate value exceeds \$1, and numismatic items; owned or leased.	000. This category includes any of the art objects; household equipment and
DESCRIPTION OF AS		scription is required - see i	nstructions p.4)	VALUE OF ASSET
See Attached				
		PART C – LIABILITI	ES	
LIABILITIES IN EXCESS OF \$1,000 (Se NAME AND ADDRESS		page 4):		AMOUNT OF LIABILITY
See Attached				
· · · · · · · · · · · · · · · · · · ·				
JOINT AND SEVERAL LIABILITIES NO NAME AND ADDRESS		OVE:	····	AMOUNT OF LIABILITY
See Attached				

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a completopy 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.  I 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.1	ete ore				
— Total to the a sep) of the part to to the tank to tank and the					
the Annual and a south	I 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 INCOME (See instructions on page 5):					
NAME OF SOURCE OF INCOME EXCEEDING \$1,000   ADDRESS OF SOURCE OF INCOME AMOUNT					
See Attached					
SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting personsee instructions on page 5]:					
NAME OF NAME OF MAJOR SOURCES ADDRESS PRINCIPAL BUSINESS BUSINESS ENTITY OF BUSINESS' INCOME OF SOURCE ACTIVITY OF SOURCE					
n/a	5_				
	रि				
BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3	Ĭ				
NAME OF BUSINESS ENTITY n/a	T)				
ADDRESS OF PURITY	<u></u>				
PRINCIPAL BUSINESS	<del>-17</del>				
ACTIVITY POSITION HELD					
WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST					
PART F - TRAINING					
For officers required to complete annual ethics training pursuant to section 112.3142, F.S.					
☐ I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.					
OATH STATE OF FLORIDA LCC	S. Contract				
COUNT OF					
I, the person whose name appears at the Sworn to (or affirmed) and subscribed before me by means of beginning of this form, do depose on oath or affirmation day of					
and say that the information disclosed on this form  June , 20 20 by Kita Noelle Branning of this form	~				
and any attachments hereto is true, accurate,	5				
and complete. (Signature of Notary Public-State of Florida)	-				
(Print, Type, or Stamp Commission Name of Notary Public State OF FLORIDA	E				
Personally Known Personally Known					
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE  Type of Identification Produced  Type of Identification Produced					
If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he she must complete the following statement:	ΣΓ				
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.					
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	1.				
IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					

JUBB A, Mydrs
NOTARY PUBBIC STATE OF PLORES
MY COMMISSION EXPIRES JUNE 14, 2
COMMISSION EXPIRES JUNE 14, 2
COMMISSION EXPIRES JUNE 14, 2

## PART B - ASSETS

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

VALUE OF ASSET

AMOUNT OF LIABILITY

Homestead	\$600,000
Suncoast Checking Account	\$47
Suncoast Saving Account	\$30
Finemark National Checking	\$13,000
American Express High Yield Savings	\$35,286
2015 Honda Pilot	\$12,000
2016 Ford Expedition	\$15,000
Livewell Mutual Fund IRA	\$6,889
Deferred compensation 457(b)	\$17,780
Sammons IRA	\$3,000

# **PART C - LIABILITIES**

LIABILITIES IN EXCESS OF \$1,000
NAME AND ADDRESS OF CREDITOR

Finemark National mortgage	\$425,569
Finemark HELOC	\$72,057
2015 Handa Dilat	\$8.016

2015 Honda Pilot \$8,016 2016 Ford Expedition \$12,059

# PART D - INCOME

**Primary Sources of Income** 

Name of Source of Income Address of Source of Income Amount

Exceeding \$1,000

Lee County Tax Collector 2480 Thompson Street, Fort Myers, FL 33901 \$112,653

# PART E - INTERESTS IN SPECIFIED BUSINESS

N/A



# 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 Tebulating 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., 3™ 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-Meil Ballots, and the Initial Canvass of Vote-by-Meil 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., 3™ Floor, Fort Myers, 33901

Friday, 11-06-20 at 2 PM

Cenvass of Overseas Vote-by-Meil Ballots, Submit Official Results, Certify the Election, Submit Conduct of Election Report, Rendom 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.

/ $/$	<u>/) / ) i em a candidate for local office a</u>	nd have received a copy of the above schedules.		
x / bul	Il Brandine	Noelle Branning	5/28/	2020
Signature		Print Name	Date	