




LEE COUNTY ELECTIONS

22 JUN 13 PM 2 41 50 E LEE CO FL

CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL

REVISED

Candidate Name	BARBARA ANN RUBEN		
Residence Address	1351 MIDDLE GULF DRIVE, A-1		
City and Zip Code	SANIBEL, FL. 33957		
Mailing Address	<input checked="" type="checkbox"/> Check if same as above.		<input type="checkbox"/> Check if different from residence.
Telephone Number(s)	<input checked="" type="checkbox"/> Daytime (list below)	OR	<input type="checkbox"/> Alternate (list below)
	304-281-8583		
Campaign Email Address	barrub2002@yahoo.com		
Campaign Website			
Office Sought	BOARD MEMBER SANIBEL PUBLIC LIBRARY DISTRICT		
Area, District, Group or Seat #	SEAT # 5		
<p>→ 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.</p> <p>→ 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.</p>			
→ Political Party for Office Sought	NON-PARTISAN		
Incumbent	<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No
Date of Birth or Voter Registration ID #	08/16/1944		
Candidate Signature & Date	 6/11/2022		

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website www.lee.vote or visit the following link: <https://www.lee.vote/Candidates/Candidate-Online-Packets>. Under Florida Law, a candidate's campaign-contact information, such as address, telephone number, and email address are available to the public. If you have questions or need more information about becoming a candidate for public office, please call (239) LEE-VOTE (239-533-8683) and ask for the Qualifying Department.

SPECIAL DISTRICT CANDIDATES

Candidates may pre-qualify beginning Monday, May 30, 2022

Official Candidate-Qualifying Period:
NOON, Monday, June 13, 2022, through NOON, Friday, June 17, 2022

Forms Required to Open Candidate File

- Candidate Campaign File Cover Sheet
- Form DS-DE 9 Appointment of Campaign Treasurer and Designation of Campaign Depository for Candidates
- Lee County Campaign Finance Reporting System Affidavit (CFR Affidavit)
- Text Messaging Service Agreement
- Form DS-DE 84 Statement of Candidate (filed within 10-days of filing Form DS-DE 9)

A Candidate who does not collect contributions and whose only expense is the filing fee or petition signature verification fee is not required to appoint a campaign treasurer or designate a primary campaign depository. The following form is required instead of Forms DS-DE 9, DS-DE 84, and Lee County CFR Affidavit:

- Affidavit of Intent

Method of Qualifying for the Ballot

By Fee

Lee County Supervisor of Elections

Special District Offices are Non Partisan offices. During the qualifying period, candidates pay a qualifying fee of **\$25.00**. The filing fee can be paid by personal funds such as a personal check, money order, or cash.

By Petition

A candidate may start collecting signatures on Form **DS-DE 104 (eff. 09/11) Candidate Petition Form** once Form DSDE 9 is filed with the Lee County Supervisor of Elections Office. Candidates must collect the valid signatures of **25 registered voters who reside within the Special District**. The signature verification fee is **10 cents per signature** submitted. A candidate who obtains the required number of signatures will not be required to pay the filing fee. The deadline to submit petitions is **NOON May 16, 2022**.

By Write In

During the qualifying period, a write-in candidate must complete the appropriate forms. The names of write-in candidates do **not** appear on the ballot.

Documents Required During Qualifying Week

- Form 1 Statement of Financial Interests for 2021 - must be properly completed, signed, and dated
- File the appropriate **CANDIDATE OATH** (must be notarized and properly executed);
 - DS-DE 302NP: Candidate Oath –Non Partisan Office (must be properly executed)
 - DS-DE 302NP (modified) Candidate Oath for Lee Memorial Health System Non Partisan Office (must be properly executed)
- Canvassing Board Meetings and Logic and Accuracy Testing Schedules for the Primary and General Elections - signed and dated

THE DEADLINE TO FILE IS NOON, FRIDAY, JUNE 17, 2022!

The information contained in this Fact Sheet and other literature is not comprehensive. If you are running for office, you are responsible for becoming acquainted with relevant Florida election laws, local charters, or ordinances that might affect your campaign, such as qualifications to run for office or placement of signage.

**CANDIDATE OATH
NONPARTISAN OFFICE**

22 JUN 13 PM 2 42 SOE LEE CO F1

(Do not use this form if a Judicial or School Board Candidate)

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, BARBARA RUBEN,

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box (see page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the nonpartisan office of BOARD Member Commission District Public,
(Office) (District #)

#5; I am a qualified elector of Lee County, Florida;
(Circuit #) (Group or Seat #)

I am qualified under the Constitution and the Laws of Florida to 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 which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required 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 your voter information card): 122959940

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]

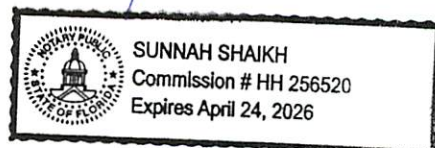
Barbara Ruben Telephone Number 304 281-8583 Email Address Barbarub2002@yahoo.com
Signature of Candidate
1351 Middle Gulf (A-1) Dandel Florida 33957
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Lee

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence
this 13th day of JUNE, 2022.

Personally Known OR Produced Identification
Type of Identification Produced: FL DL





LEE COUNTY ELECTIONS

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

I, BARBARA ANN RUBEN, am a candidate for the independent special
(print name)

district office of:

SANIBEL LIBRARY BOARD OF COMMISSIONERS Seat #5
(include district name AND .district, seat, area or group #)

in the November 8, 2022, General Election. I declare that my only campaign expense, 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 prior to doing so, I am required to file Form DS-DE 9 (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.

X Barbara A. Ruben
Signature of Candidate

5/26/2022
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-06/21/21 (Lee County Special District Forms)



LEE COUNTY ELECTIONS

Tommy Doyle, Supervisor of Elections

(239) LEE-VOTE (533-8683)

www.lee.vote

TEXT MESSAGING SERVICE AGREEMENT

Would you like to receive text message reminders from Lee County Supervisor of Elections (Lee County SOE) about your Campaign Financial Reports and notifications? The Lee County SOE is offering a reminder service by text message to your cell phone. This service is optional. You will continue to receive notices by mail and/or email regardless of whether you choose to receive text messages.

We will not send you text messages without your consent. Text messages are not confidential – anyone who uses your cell phone or who has access to it might see the text messages. Communication service providers used by you or Lee County SOE may also be able to see these messages. Text message charges may apply depending on your text message plan. Therefore, the Lee County SOE will not send you text messages without your permission.

By signing this Text Messaging Service Agreement, you are authorizing the Lee County SOE to send you text messages regarding reports due, important dates and other information pertaining to your account.

You may stop this service by texting STOP to any message or by calling the Qualifying Department.

I understand that this service is optional and I can STOP it at any time.

I would like to receive text messages from Lee County SOE.

YES

NO

Printed Name	<i>BARBARA A. RUBEN</i>	Date	<i>5/26/2022</i>
Office Sought			
Cell Phone Number	<i>(304) 281-8583</i>	User ID #	OFFICE USE
Signature	<i>Ms. Barbara A. Ruben</i>		

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME - FIRST NAME - MIDDLE NAME :

RUBEN - BARBARA - ANN

MAILING ADDRESS :

1351 MIDDLE GOLF DRIVE, Unit A-1

SANIBEL, 33959 LEE
CITY: ZIP: COUNTY:

NAME OF AGENCY :

SANIBEL LIBRARY BOARD OF COMMISSIONS

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

SEAT #5

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

COPY

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**** THIS SECTION MUST BE COMPLETED ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.

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 (must check one):

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 report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
SOCIAL SECURITY	Dept. of Treasury / IRS	/

PART B - SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
T.D. AMERITRADE	PENSION IRA	P.O. Box 2209 OMAHA, NEBRASKA 68103-2209	

PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

1351 MIDDLE GOLF DRIVE, A-1, SANIBEL, FL
33959

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D - INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
 (If you have nothing to report, write "none" or "n/a")

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TYPE OF INTANGIBLE <i>STOCKS, BONDS, IRA CASH</i>	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES <i>TD AMERITRADE SANCAD BANK</i>
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PART E - LIABILITIES [Major debts - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR <i>BSI FINANCIAL MORTGAGE CO.</i>	ADDRESS OF CREDITOR
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PART F - INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY	<i>NONE</i>	<i>NONE</i>
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

PART G - TRAINING For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 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:

Signature:

Mr. Graham A. Fisher

Date Signed:

5/26/2022

CPA or ATTORNEY SIGNATURE ONLY

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: _____

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 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), send it to CEForm1@leg.state.fl.us and retain a copy for your records. 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 CF Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2021.