


SCANNED

**LEE COUNTY
SUPERVISOR OF ELECTIONS
CANDIDATE CAMPAIGN FILE COVER SHEET**

 ORIGINAL

 REVISED

(Please Check One)

Candidate Name	BROWN, DONALD AARON		111443017
Residence Address	8521 SEDONIA CIR FORT MYERS FL 33967		
City and Zip Code			
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239-989-9727	OR	
Email Address	tropic@emburgmail.com		
Office Sought	Lee Memorial Health System		
Area, District, Group Or Seat Number	DISTRICT 5		
Political Party (if applicable for office sought)	NON-PARTISAN		
Date Of Birth Or Voter ID #	111443017		
Date	4/18/2012		
Candidate Signature			

*12APR18PM1045 SDE LEE CO FL

All candidate information becomes a public record upon receipt by the
Lee County Supervisor of Elections.

Under Florida Law, email addresses are public records; if you do not want your personal email address released, you may wish to create a "campaign-specific" email address. An email address will allow the Lee County Supervisor of Elections Office to provide a candidate with expedited written-communications and notices in addition to mailed written-communications and notifications.

LEE COUNTY—FLORIDA
AFFIDAVIT OF INTENT
SPECIAL DISTRICT CANDIDATE

SCANNED

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

BROWN, DONALD AARON
8521 SEDONIA CIR
FORT MYERS FL 33967

111443017

I, DONALD A BROWN, am a candidate for the independent special district office of:
(print name)

LEE MEMORIAL HEALTH SYSTEM DISTRICT 5
(include district name AND .district, seat, area or group #)

in the November 6, 2012 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 [Signature]
Signature of Candidate

4/11/12
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.

12APR18M1045 SDE LEE CO FL

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

SCANNED

*12APR23PM 9 57 SOE LEE CO F1

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Donald Aaron Brown

3. Address (include post office box or street, city, state, zip code)

8521 SEDONIA CR
FT MYERS, FL 33967

4. Telephone

(239) 989-9727

5. E-mail address

tropic@embargmail.com

6. Office sought (include district, circuit, group number)

BOARD OF DIRECTORS DISTRICT 5
LEE MEMORIAL HEALTH SYSTEM

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my

Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Donald A Brown

11. Mailing Address

8521 Sedonia Cr

12. Telephone

(239) 989-9727

13. City

FT MYERS

14. County

LEE

15. State

FL

16. Zip Code

33967

17. E-mail address

tropic@embargmail.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

BB&T

20. Address

20280 GRANDE OAK SHOPPES Blvd

21. City

ESTERO

22. County

LEE

23. State

FL

24. Zip Code

33928

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

4/20/12

26. Signature of Candidate

X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Donald A Brown, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/20/12
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

SCANNED

I, Donald A Brown,

candidate for the office of BOARD OF DIRECTORS, LEE MEM. HEALTH
SYSTEM District 5

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X



Signature of Candidate

4/18/12

Date

12APR26PM1251 SDELE001

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).