LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL	(Please Check One)	REVISED
	(Please Check One)	

Candidate Name	Steve Brown 5	
Residence Address	3819 W Gulf Dr	
City and Zip Code	Sanibel 33957	
Mailing Address (if different)	V Check if same as above.	
Telephone Number(s) (Daytime)	239-472-8645 OR 239-691-4513	
Email Address	SRB on Sanihel @ AOL	
Office Sought	LEE MEMORIAL HOSPITAL BOARD DIRECTOR	
Area, District, Group Or Seat Number	DISTRICT 1	
Political Party (if applicable for office sought)	N.A.	
Date Of Birth Or Voter ID #	10/3/42	
Date	5/22/12	
Candidate Signature	X Stephen R Brown	

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

State of Florida
County of Lee

State of Florida
County of Lee

MEMDRIAL HEALTH System Lee County TRAMM Services Board Or Directors District name AND district, seat, area or group #)

in the <u>November 6, 2012 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*, <u>I will not be required to</u>: 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</u> 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 Juphen R Brown
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.

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

12MAY29AM 9 25 SOE LEE CO F1

candidate for the office of DIRECTOR LEE MEMORIAL HEALTH CALL HEAL
Chapter 106, Florida Statutes.
,
X Alcohon R Brown 5/22/12 Signature of Candidate Date

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).