

LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	RICHARD ADRIAN CLARK		
Residence Address	11416 PEMBROOK RUN		
City and Zip Code	ESTERO 33928		
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239-498-5539	OR	239-994-6341
Email Address	MrAdrianClark@AOL.com		
Office Sought	BOARD OF SUPERVISORS		
Area, District, Group Or Seat Number	STONEYBROOK CDD SEAT 1		
Political Party (if Applicable)	NON		
Date Of Birth Or Voter ID #	11-01-1943		
Date	12 JUNE 2008		
Candidate Signature	X Richard Adrian Clark		

All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.

Candidates who provide an email address may be contacted by this office, via the email address provided by the candidate, for campaign related communications that pertain exclusively to the candidate's campaign.

All other mailings from this office, which pertain to every candidate, will be via United States Postal Service.

SCANNED

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

OFFICE USE ONLY

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate
RICHARD ADRIAN CLARK

1. Address (include post office box or street, city, state, zip code)
*11716 PEMBROOK RUN
ESTERO, FL 33928*

Telephone (optional)
(239) 498-5339

2. Party (Partisan candidates only)

3. Office (add district, circuit, group number)
STONEBROOK CDD, SEAT 1

I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer
SELF (RICHARD ADRIAN CLARK)

5. Mailing Address (If post office box or drawer add street address)
11716 PEMBROOK RUN,

6. Telephone
(239) 498-5339

7. City
ESTERO

8. County
LEE

9. State
FLORIDA

10. Zip Code
33928

I have designated the following named bank as my Primary Depository Secondary Depository

11. Name of Bank
IBM SOUTHEAST EMPLOYEES FCU

12. Street Address
P.O. BOX 5090

13. City
BOCA RATON

14. County
PALM BEACH

15. State
FLORIDA

16. Zip Code
33431

17. Signature of Candidate
X Richard Adrian Clark

Date
6/23/08

Campaign Treasurer's Acceptance of Appointment

I, *RICHARD ADRIAN CLARK*, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of *RICHARD ADRIAN CLARK*,

who is seeking nomination or election as a *BOARD SUPERVISOR* candidate to the office of
(Party)

SEAT 1 STONEBROOK CDD . As a duly registered voter in *LEE*

County, Florida, I am qualified to accept this appointment.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

6/23/08
Date

X Richard Adrian Clark
Signature of Campaign Treasurer or Deputy Treasurer

OFFICE USE ONLY

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

I, RICHARD ADRIAN CLARK,
candidate for the office of BOARD SUPERVISOR, STONEYBROOK CDD
Seat 1
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X Richard Adrian Clark

Signature of Candidate

12 JUNE 2008

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).

SCANNED

AFFIDAVIT OF INTENT LEE COUNTY SPECIAL DISTRICT CANDIDATE

State of Florida
County of Lee

I, RICHARD ADRIAN CLARK, am a candidate for the Special District
(print name)

office of: STONEBROOK C.D.D. SEAT 1 SUPERVISOR
(district name and district #, seat #, or area#)

in the 11/04/2008
2008 election. I understand that my only campaign
(date of election)

expense, from personal funds, shall be the \$25 candidate-qualifying-fee or the signature verification fee for candidates who qualify by submitting 25 valid candidate petition signatures.

As long as these are my only campaign expenses, 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 and, therefore, during my campaign, 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 campaign expense, prior to doing so, I understand that I AM REQUIRED TO FIRST 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.

Richard Adrian Clark
Signature of Candidate

12 June 2008
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."



**LOYALTY OATH FOR
NON-PARTISAN OFFICE**
(Sections 876.05-876.10, Florida Statutes)

OFFICE USE ONLY

STATE OF FLORIDA

LEE COUNTY

I, <u>RICHARD</u>	<u>ADRIAN</u>	<u>CLARK</u>
First Name	Middle Name/Initial	Last Name

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, ADRIAN CLARK
(PLEASE PRINT NAME AS YOU WISH IT TO BE WRITTEN IN ON THE BALLOT -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of SUPERVISOR STONEY BROOK Seat 1
(office) (district) (group)

My legal residence is LEE County, Florida. 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.

<input checked="" type="checkbox"/> <u>Richard Adrian Clark</u>	<u>(239) 498 5539</u>	<u>Mr Adrian Clark@AOL.com</u>
Signature of Candidate	Daytime Telephone Number	Email Address

Address 11416 PEMBROOK RUN City ESTERO State FL ZIP Code 33928

Sworn to (or affirmed) and subscribed before me this 13th day of June, 2008.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

Bernice Ramos Feliciano
Signature of Notary Public - State of Florida
Print, Type or Stamp Commissioned Name of Notary Public



Bernice Ramos Feliciano
Commission # DD589927
Expires October 19, 2010
Bonded Troy Firm - Insurance, Inc. 800-365-7019

FINANCIAL INTERESTS

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

LAST NAME - FIRST NAME - MIDDLE NAME :
 CLARK RICHARD ADRIAN

MAILING ADDRESS :
 11416 PEMBROOK RUN

CITY: ESTERO ZIP: FL COUNTY: 33928

NAME OF AGENCY :
 STONEYBROOK CDD

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
 VICE CHAIRMAN BOARD OF SUPERVISORS

FOR OFFICE USE ONLY

COPY

ID Code

ID No.

Conf. Code

P. Req. Code

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

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

****BOTH PARTS OF THIS SECTION MUST BE COMPLETED****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):

DECEMBER 31, 2007 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
FIDELITY INVESTMENTS (HANDLES IBM PENSION)	397 WILLIAMS ST MC1W MARLBOROUGH MA 01752	HANDLES PENSION PLANS FOR LARGE CORPORATIONS
SOUTHERN BAY REALTY	3409 PELICAN LANDING PKWY BONITA SPRINGS FL 34134	REAL ESTATE

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
FIDELITY INVESTMENTS			
None			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

11416 PEMBROOK RUN, ESTERO, FL 33928

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.

OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
BANK ACCOUNT	IBM SE EMPLOYEES RCU, BOCA RATER
CD	— " —
VARIOUS STOCKS	TD AMERITRADE

PART E — LIABILITIES [Major debts]	
NAME OF CREDITOR	ADDRESS OF CREDITOR
NONE	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]			
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	NONE		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required): *Richard A. Clark* DATE SIGNED (required): *5/30/2008*

FILING INSTRUCTIONS:

WHAT TO FILE:
After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

NOTE:
MULTIPLE FILING UNNECESSARY:
Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:
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.

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.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Blvd. South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

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 for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

ORIGINAL DUPLICATE

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY 10

(1) ADRIAN CLARK
Name

(2) 11416 PEMBROOK RUN, ESTERO, FL 33928
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): STONEBROOK CDD-1

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10/31/2008 To 2/2/2009 Report Type: TR-4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 341.72

Transfers to Office Account \$ 0.00

Total Monetary \$ 341.72

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 500.00

(10) TOTAL Monetary Expenditures To Date

\$ 500.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) ADRIAN CLARK

(Type name) ADRIAN CLARK

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Adrian Clark
Signature

X Adrian Clark
Signature

08DEC31PM1237 SDE Lee Co FI

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ADRIAN CLARK (2) I.D. Number 106
 10/31/2008 through 2/2/2009
 (3) Cover Period / / through / / (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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*08DEC31PM1237 SDE Lee Co F1

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ADRIAN CLARK (2) I.D. Number 106
 (3) Cover Period 10/31/2008 through 2/2/2009 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
12/1/2008 //	Clark, Adrian 11416 Pembroke Run Esteros, FL 33928	refund of remaining part of \$500 donation. <i>this was only donation</i>	DI		\$341.72
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*08DEC31PM1237 SDE Lee Co Fl

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) ADRIAN CLARK

OFFICE USE ONLY 106

Name

(2) 11416 PEMBROOK RUN, ESTERO, FL 33928

Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): STONEYBROOK CDD-1

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10/31/2008 To 2/2/2009 Report Type TR-4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 341.72

Transfers to Office Account \$ 0.00

Total Monetary \$ 341.72

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 500.00

(10) TOTAL Monetary Expenditures To Date

\$ 500.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) ADRIAN CLARK
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Signature Adrian Clark

I certify that I have examined this report and it is true, correct, and complete.

(Type name) ADRIAN CLARK
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

Signature Adrian Clark

FINAL REPORT

7081E039M0857 S0E L ee Co FI

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ADRIAN CLARK (2) I.D. Number 106

(3) Cover Period 10/31/2008 through 2/2/2009 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		Amount
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ADRIAN CLARK (2) I.D. Number 106
 (3) Cover Period 10/31/2008 through 2/2/2009 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
12/1/2008 //	Clark, Adrian 11416 Pembroke Run Estero, FL 33928	refund of remaining part of \$500 donation. this was	DI		\$341.72
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*08DECO3AM0857 SDE Lee Co FI

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

ADRIAN CLARK
11416 PEMBROOK RUN
ESTERO, FL 33928

Candidate's Name (Last, Suffix, First, Middle)
OR Political Committee, CCE or Party Name

Address (Number and Street)

City State Zip Code

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report. |
| <input type="checkbox"/> Political Committee | <input type="checkbox"/> Party Executive Committee | <input type="checkbox"/> Check here if PC or CCE has DISBANDED and will no longer file reports. |

OFFICE USE ONLY

106



STONEBROOK CDD-1

Identification Number (Assigned by Division of Elections)

Office Sought (Include District, Circuit or Group Number)

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

- January
 April
 July
 October

PRIMARY ELECTION

- 32nd day prior
 18th day prior
 4th day prior

GENERAL ELECTION

- 48th day prior
 32nd day prior
 18th day prior
 4th day prior

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

10/11/2008 through 10/30/2008 (G4)

X

Adrian Clark
Signature

10/19/08
Date

SIGNATURES REQUIRED FOR: Candidates
Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
Political Committees
Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
Committees of Continuous Existence
Treasurer (s. 106.04(4)(c), F.S.)
Party Executive Committees
Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY 106

(1) ADRIAN CLARK
Name

(2) 11416 PEMBROOK RUN, ESTERO, FL 33928
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): STONEYBROOK CDD-1

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 9/27/2008 To 10/10/2008 Report Type G3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 58.28

Transfers to Office Account \$ 0.00

Total Monetary \$ 58.28

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 500.00

(10) TOTAL Monetary Expenditures To Date

\$ 158.28

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) ADRIAN CLARK
 Individual (only for electioneering communit.) Treasurer Deputy Treasurer

(Type name) ADRIAN CLARK
 Candidate Chairperson (only for PC, PTY & electioneering communit. organization)

X Adrian Clark
Signature

X Adrian Clark
Signature

*OBJECT 10PM0338 SDE Lee Co FI

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ADRIAN CLARK (2) I.D. Number 106
 (3) Cover Period 9/27/2008 through 10/10/2008 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
10/9/2008 //	Office Max, Coconut Point Mall Esteros, FL 33931	copying (flyers)	MO		\$58.28
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ADRIAN CLARK (2) I.D. Number 106
 9/27/2008 10/10/2008
 (3) Cover Period / / through / / (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(6) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

ADRIAN CLARK
11416 PEMBROOK RUN
ESTERO, FL 33928

Candidate's Name (Last, Suffix, First, Middle)
OR Political Committee, CCE or Party Name

Address (Number and Street)

City State Zip Code

Candidate

Committee of Continuous
Existence

Check box if address has changed since last
report.

Political Committee

Party Executive Committee

Check here if PC or CCE has DISBANDED
and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

January

April

July

October

PRIMARY ELECTION

32nd day prior

18th day prior

4th day prior

GENERAL ELECTION

40th day prior

32nd day prior

18th day prior

4th day prior

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

9/13/2008 through 9/26/2008 (G2)

X

Richard A. Clark

Signature

9/13/08

Date

SIGNATURES REQUIRED FOR:

Candidates

Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees

Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Committees of Continuous Existence

Treasurer (s. 106.04(4)(c), F.S.)

Party Executive Committees

Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

OFFICE USE ONLY

106

STONEBROOK CDD-1

Identification Number (Assigned by Division
of Elections)

Office Sought (Include District, Circuit or
Group Number)

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

OFFICE USE ONLY

106

ADRIAN CLARK
11416 PEMBROOK RUN
ESTERO, FL 33928

STONEBROOK CDD-1

Candidate's Name (Last, Suffix, First, Middle)
OR Political Committee, CCE or Party Name

Identification Number (Assigned by Division
of Elections)

Address (Number and Street)

Office Sought (Include District, Circuit or
Group Number)

City State Zip Code

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report. |
| <input type="checkbox"/> Political Committee | <input type="checkbox"/> Party Executive Committee | <input type="checkbox"/> Check here if PC or CCE has DISBANDED and will no longer file reports. |

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

- January
 April
 July
 October

PRIMARY ELECTION

- 32nd day prior
 18th day prior
 4th day prior

GENERAL ELECTION

- 48th day prior
 32nd day prior
 18th day prior
 4th day prior

- TERMINATION REPORT
 SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

8/22/2008 through 9/12/2008 (G1)

X

Adrian Clark Signature 7/23/08 Date

SIGNATURES REQUIRED FOR: **Candidates**
Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
Political Committees
Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
Committees of Continuous Existence
Treasurer (s. 106.04(4)(c), F.S.)
Party Executive Committees
Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

08 JUL 25 PM 11:26 SDE Lee Co FI

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

ADRIAN CLARK
11416 PEMBROOK RUN
ESTERO, FL 33928

Candidate's Name (Last, Suffix, First, Middle)
OR Political Committee, CCE or Party Name

Address (Number and Street)

City State Zip Code

Candidate

Committee of Continuous Existence

Check box if address has changed since last report.

Political Committee

Party Executive Committee

Check here if PC or CCE has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

January

April

July

October

PRIMARY ELECTION

32nd day prior

18th day prior

4th day prior

GENERAL ELECTION

48th day prior

32nd day prior

18th day prior

4th day prior

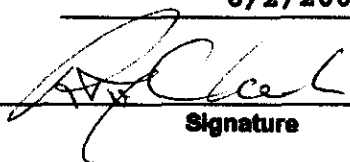
TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

8/2/2008 through 8/21/2008 (F3)

X


Signature

7/23/08
Date

SIGNATURES REQUIRED FOR:

Candidates

Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees

Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Committees of Continuous Existence

Treasurer (s. 106.04(4)(c), F.S.)

Party Executive Committees

Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

OFFICE USE ONLY

106

STONEBROOK CDD-1

Identification Number (Assigned by Division of Elections)

Office Sought (Include District, Circuit or Group Number)

08 JUL 25 PM 11:26 SDE Lee Co F1

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ADRIAN CLARK (2) I.D. Number 106

(3) Cover Period 7/19/2008 through 8/1/2008 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ADRIAN CLARK

(2) I.D. Number 106

(3) Cover Period 7/19/2008 through 8/1/2008

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
7/23/2008 //	STONEBROOK GOLF, 21251 Stoneybrook Golf Blvd Esteros, FL 33928	payment for advert on golf cart gps system	MO		\$100.00
1					
//					
//					
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//					
//					
//					
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY 106

(1) ADRIAN CLARK

Name

(2) 11416 PEMBROOK RUN, ESTERO, FL 33928

Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): STONEBROOK CDD-1

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 4/1/2008 To 7/18/2008 / Report Type F1

Original **Amendment** **Special Election Report** **Independent Expenditure Report**

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>500.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>500.00</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

(8) **Other Distributions**
\$ 0.00

(9) **TOTAL Monetary Contributions To Date**

\$ 500.00

(10) **TOTAL Monetary Expenditures To Date**

\$ 0.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) ADRIAN CLARK

Individual (only for electioneering commun.) **Treasurer** Deputy Treasurer

X Adrian Clark
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) ADRIAN CLARK

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Adrian Clark
Signature

*08JUL09PM 1153 SDE Lee Co F1

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ADRIAN CLARK

(2) I.D. Number 106

(3) Cover Period 4/1/2008 through 7/18/2008

(4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
/ /					
/ /					
/ /					
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/ /					
/ /					

*08JUL09PM1153 SOE L ee Co F1