

RECEIVED  
SUPERVISOR OF

# PARTISAN CANDIDATE LOYALTY OATH

JUL 15 3 55 PM '00

Sections 876.05-876.10, Florida Statutes

STATE OF FLORIDA  
LEE COUNTY

PLEASE PRINT

FIRST NAME	MIDDLE NAME/INITIAL	LAST NAME
SANDRA	K.	STILWELL

I am a citizen of the State of Florida and of the United States of America, and a candidate for **public** office. I 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

### IMPORTANT NOTICE TO ALL CANDIDATES

READ CAREFULLY. YOU CANNOT CHANGE THE WAY YOU WANT YOUR NAME TO APPEAR ON THE BALLOT AFTER THE END OF QUALIFYING

PRINT NAME BELOW AS YOU WANT IT TO APPEAR ON THE BALLOT

I, SANDRA STILWELL, am a candidate for the

PLEASE PRINT NAME AS YOU WANT IT TO APPEAR ON BALLOT

office of LEE Co. TAX COLLECTOR \_\_\_\_\_

OFFICE

DISTRICT

CIRCUIT

I am a qualified elector of \_\_\_\_\_ County, Florida.

GROUP

I am qualified under the Constitution and 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 which I am required to resign pursuant to Section 99.012, Florida Statutes.

## STATEMENT OF PARTY

Section 99.021 Florida Statutes

I am a member of the REPUBLICAN party. I am not a registered member of any other political party and have not been a candidate for nomination for any other political party for a period of 6 months preceding the general election for which I seek to qualify. I have paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.**

SIGN HERE:

Sandra K. Stilwell  
Signature of Candidate

7-18-00

Date Signed

76-004588

(941) 334-9133  
Daytime Telephone #

( ) \_\_\_\_\_  
Fax Telephone Number

STILWELL, SANDRA KOLAR  
1212 BRAMANAVE  
FORT MYERS FL 33901

**'FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 1999**

LAST NAME, FIRST NAME-MIDDLE NAME: <i>Stilwell, Sandra K.</i>		NAME OF AGENCY: <i>Lee Co. Tax Collector</i>	
MAILING ADDRESS: <i>1212 Branan Avenue</i>		OFFICE HELD: <input type="checkbox"/> OFFICER	
CITY: <i>FL. Myers, FL 33901 Lee</i>		OFFICE SOUGHT: <input checked="" type="checkbox"/> CANDIDATE <i>Lee Co Tax Collector '99</i>	
		POSITION: <input type="checkbox"/> OTHER	

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

**NOTICE: Under provisions of Sec. 112.317, Florida Statutes, a failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000.**

**PART A — NET WORTH**

Please enter the value of your net worth as of December 31, 1999, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see instructions on page 3.]

My net worth as of 6/30 19 2000 was \$ 6,773,650.00

**PART B — ASSETS WORTH MORE THAN \$1,000**

**HOUSEHOLD GOODS AND PERSONAL EFFECTS:**

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effects (described above) is \$ 131,000.00

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

DESCRIPTION OF ASSET	VALUE OF ASSET
<i>Please see attached</i>	

**PART C — LIABILITIES IN EXCESS OF \$1,000**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
<i>(Please see attached)</i>	<u>1</u>

**PART D — INCOME**

You may **EITHER** (1) file a complete copy of your 1999 federal income tax return including all attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D on page 2 of this form.

I elect to file a copy of my 1999 federal income tax return. [If you check this box and attach a copy of your 1999 tax return, you need not complete the remainder of Part D.]

**Attachment to Form 6  
FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 1999**

*Part A My net worth as of 6/30/00 was-----\$1,773,650.00*  
*Part B -Assets worth more than \$1,000.00*

The aggregate value of my household goods and personal effects is \$ 131,000.00

Assets individually valued at over \$1 ,000.00:  
 Description of asset:

Stilwell Management, L.L.C. 100% Owner-----\$4,050,000.00  
 (Capitalized earnings value)  
 Captiva Island Inn and Terrace Tropical Grill  
 11509 Andy Rosse Lane, Captiva, FL 33924  
 and  
 College Parkway Professional Center  
 8841 College Parkway, Fort Myers, FL 33919

Bank Accounts and Money Market Accounts-----\$ 98,325.00  
 (SunTrust, SouthTrust, Colonial and Charles Schwab)

IRA's and value of life insurance ----- 35167.00

Home, 1212 Braman Avenue, Fort Myers, FL 33901----- -\$ 800,000.00  
 Duplex, 12090 Siesta Drive, Fort Myers Beach, FL 3393 1----- 225,000.00  
 House, 1455 Mandel Rd., Fort Myers, FL 33919 1/3 owner-----26,000.00

**TOTAL ASSETS-----\$5,365,492.00**

*Part C- Liabilities in excess of \$1,000.00*

Name and address of creditor

SunTrust Bank, PO Box 2554, Fort Myers (Stilwell Management)-----\$1,472,000.00  
 SouthTrust Bank, PO Box 2554, Fort Myers (Stilwell Management)----- 1,408,808.00  
 SunTrust Mortgage, PO Box 530718, Atlanta, GA----- 536,449.00  
 SunTrust Mortgage, PO Box 530718, Atlanta, GA----- 154,852.00  
 SouthTrust Mortgage, PO Box 2554, Fort Myers, FL 1/3 owner----- 19,733.00  
**TOTAL LIABILITIES-----\$3,591,842.00**

NO. 11 22 8 01 100  
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 OFFICE OF  
 THE  
 CLERK OF  
 THE  
 COUNTY OF  
 LEWIS AND CLARK  
 JUL 13 3 21 PM '00

**Attachment to  
FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 1999  
Part D**

***Primary Sources of Income:***

Name of source of income exceeding \$1,000.00:	Address of Source	Amount
Capital gain on sale of Mariner's Lodge & Marina 17990 San Carlos Boulevard, Fort Myers Beach, FL 3393 1 Sold to: Teranga Management, Inc. 17990 San Carlos Blvd., Fort Myers Beach, FL 3393 1		\$1,731,130.00
Stilwell Management, L.L.C. Established 2/1 8/99-----		64,240.00
Interest Income – The Chicago Trust, Chicago, IL-----		4,785.00

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THE CLERK  
OF THE  
SUPREME COURT  
OF THE STATE OF  
FLORIDA

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**CANVASSING BOARD MEETINGS**  
*For*  
**FALL 2000 ELECTIONS**

**FIRST PRIMARY**

Friday September 1 @ 8:00 am	Canvass absentee ballots
Friday September 1 @ 1:00 pm	Test the tabulating equipment
Tuesday September 5 @ 8:00 am	Canvass absentee ballots
Wednesday September 6 @ 8:00	Certify the Election

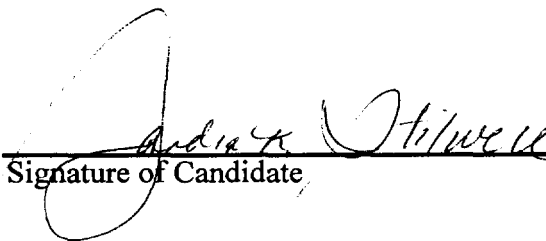
**SECOND PRIMARY**

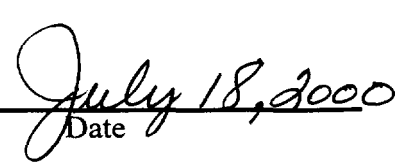
Friday September 29 @ 8:00 am	Canvass absentee ballots
Monday October 2 @ 1:00 pm	Test the tabulating equipment
Tuesday October 3 @ 8:00 am	Canvass absentee ballots
Wednesday October 4 @ 8:00 am	Certify the Election

**GENERAL ELECTION**

Friday November 3 @ 8:00 am	Canvass absentee ballots
Monday November 6 @ 1:00 pm	Test the tabulating equipment
Tuesday November 7 @ 8:00 am	Canvass absentee ballots
Wednesday November 8 @ 8:00 am	Certify the Election

I acknowledge that I am in receipt of this notice.

  
Signature of Candidate

  
Date

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SUPPORTERS OF  
JUL 18 3 22 PM '00