

2012 CANDIDATE QUALIFYING CHECKLIST

Candidate's Name: Chickie Brandimarte

Office: **Dania Beach City Commission**

Date Qualified: 6-8-12 Time: 10:00 Am

1. Appointment of Campaign Treasurer and Designation of Campaign Depository (DS-DE 9)
2. Statement of Candidate (DS-DE 84)
3. Loyalty Oath for Non-Partisan Office/Oath of Candidate (DS-DE 25)
4. Notice of Candidacy for City Commission
5. Voter's Registration Documentation (at least 1 year preceding date of election)
6. Statement of Financial Interest (FORM 1)
7. Broward County Statement of Ethical Campaign Practices
8. Receipt of written notice of the provisions of Section 106.1435 - Usage and Removal of Political Campaign Advertisements
9. \$203.82 Election Assessment Fee (Check must be from Campaign account made payable to the City of Dania Beach)
10. \$100.00 Filing Fee (Check must be from Campaign account made payable to the City of Dania Beach)
11. Political Sign Bond Application (\$100.00 check must be from Campaign account made payable to the City of Dania Beach)

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

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

(PLEASE PRINT OR TYPE)

RECEIVED
APR 13 2012
BY: *RS*



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)

CHICKIE BRANDIMARTE

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

*101 S.E. 33RD AVE
604*

4. Telephone

(954) 665-0298

5. E-mail address

CB319@AOL.COM

DANIA BEACH, FL 33004

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

COMMISSIONER DANIA

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

EMILIO BRANDIMARTE

11. Mailing Address

101 S.E. 33RD AVE #604

12. Telephone

(954) 559-6452

13. City

DANIA BEACH

14. County

BROWARD

15. State

FL.

16. Zip Code

33004

17. E-mail address

CB319@AOL.COM

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Community Bank

20. Address

1991 Sterling Rd

21. City

Dania Beach

22. County

Broward

23. State

FL

24. Zip Code

33004

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

4-13-2012

26. Signature of Candidate

X Chickie Brandimarte

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

I, *EMILIO BRANDIMARTE*, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

Campaign Treasurer Deputy Treasurer.

4/13/2012

Date

X [Signature]

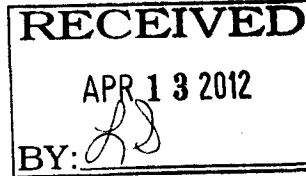
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY



I, Chickie Brandalante,
candidate for the office of Commissioner;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Chickie Brandalante
Signature of Candidate

4-13-2012
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).

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, Chickie BRANDIMARTE
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * – NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of COMMISSIONER, _____, _____
(office) (district #)
_____ ; I am a qualified elector of BROWARD 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.

Chickie Brandimarte 1954 665-0892 CB319@AOL.COM
X Signature of Candidate Telephone Number Email Address

101 S 63rd AVE DAWA BEACH FL 33004
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 101943259

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

CHIK-EE BRAN-dee-MAR-TAI

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 8 day of JUNE, 2012.

Personally Known: X or _____

Produced Identification: _____

Type of Identification Produced: _____



Louise Stilson
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**NOTICE OF CANDIDACY FOR
CITY COMMISSIONER**

I, Chickie BRANDIMARTE, residing at 101 SE 3rd Ave
(name of candidate) (resident address of candidate)

Dania Beach, Broward County, Florida, by this document give notice of my candidacy for the office of city commissioner of the City of Dania Beach, Florida, in the election to be held in the city on November 6, 2012.

I do further state that I am a bona fide citizen of the United States of America, and a resident of the City of Dania Beach; and that I have resided in and have been a registered voter in the City of Dania Beach, for one (1) year immediately preceding the date of the election to be held; that I am over the age of twenty-one (21) years; that I have paid the qualifying fee for the office, and that I have fully satisfied all conditions precedent to such candidacy, pursuant to the provisions of the charter of the city.

Chickie Brandimarte
Signature of candidate

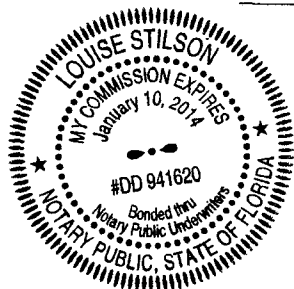
State of Florida
County of Broward

Before me, the undersigned authority, this day personally appeared CHICKIE BRANDIMARTE
(name of candidate)
who, upon being duly sworn, deposed and said: That he or she is the candidate referred to in the foregoing notice; that he or she is familiar with the contents of the notice, and the facts and matters stated in it are true; and that he or she did sign the notice for the purpose specified in it.

Personally Known X or Produced Identification _____

Type of Identification Produced _____

Sworn to and subscribed before me on JUNE 8, 2012.



Louise Stilson
Notary Public
State of Florida

YOUR PRECINCT NUMBER El Número De Su Recinto Electoral **S006**
YOUR POLLING LOCATION Su Centro Devotación

Frost Park, City of Dania Beach
300 NE 2nd St, Dania Beach, Fl. 33004

YOU ARE ELIGIBLE TO VOTE FOR A REPRESENTATIVE IN EACH DISTRICT LISTED
USTED TIENE EL DERECHO DE VOTAR POR UN REPRESENTANTE DE CADA DISTRITO ENUMERADO

US CONGRESS <i>Congreso de los EUA</i>	STATE SENATE <i>Senado Estatal</i>	STATE HOUSE <i>Cámara Estatal</i>
20	31	100
COUNTY COMMISSION <i>Comisión del Condado</i>	SCHOOL BOARD <i>Junta Escolar</i>	MUNICIPALITY <i>Municipio</i>
7	1	Dania Beach

REGISTRATION NO. 101943259 NO. DE INSCRIPCIÓN

VOTER INFORMATION CARD, BROWARD COUNTY, FL
TARJETA DE INFORMACIÓN DEL ELECTOR, CONDADO DE BROWARD, FL

REGISTRATION NUMBER Número de inscripción **101943259** REGISTRATION DATE Fecha de inscripción **Feb/23/1998** PRECINCT Alcaldía Electoral **S006**

Leberta Brandimarte
101 SE 3rd Ave APT 604 A
Dania Beach FL 33004

Dem Date Issued: Apr/28/2008

Replacement Voter Card

Brenda C. Snipes Dt. Brenda C. Snipes, Supervisor of Fl.

Confirmed by SOE since 2.23.98

FINANCIAL INTERESTS

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

LAST NAME -- FIRST NAME -- MIDDLE NAME :

BRANKIMARTE, ROBERTA, ROSE

MAILING ADDRESS :

101 S.E. 3RD AVE #604

DANIA BEACH 33004 BROWARD

CITY: ZIP: COUNTY:

FL

NAME OF AGENCY :

DANIA BEACH CITY COMMISSIONER

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

FOR OFFICE USE ONLY:

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 (must check one):

DECEMBER 31, 2011 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 (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 p. 4] (If you have nothing to report, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
SOCIAL SECURITY		

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")

N/A

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. - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
N/A	

PART E — LIABILITIES [Major debts - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
N/A	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
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):

DATE SIGNED (required):

Robert R. Bronckmarte

June 8, 2012

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).

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 Boulevard, 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.

Facsimiles will not be accepted.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.

Broward County Statement of Ethical Campaign Practices

The Broward County Ethical Campaign Practices Act shall apply to any candidate for elected public office whose constituency resides, in whole or in part, within Broward County, or when the boundaries of the public office sought are located, in whole or in part, within the County. "Candidate" means any person to whom any one or more of the following applies:

- (1) Any person who seeks to qualify for nomination or election by means of the petitioning process;
- (2) Any person who seeks to qualify for election as a write-in candidate;
- (3) Any person who receives contributions or makes expenditures, with a view to bringing about his or her nomination or election to, or retention in, public office;
- (4) Any person who appoints a treasurer and designates a primary depository; or
- (5) Any person who files qualification papers and subscribes to a candidate's oath as required by law.

A candidate's decision regarding whether to execute the statement is strictly voluntary. A candidate executing the Statement of Ethical Campaign Practices shall file the original and a copy of the executed statement, bearing the candidate's signature, with the officer before whom the candidate qualifies within five (5) days after becoming a candidate for the elected public office.

As a candidate for public office in Broward County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore:

1. I shall not make my race, color, religion, gender, national origin, physical disability, or sexual orientation an issue in my campaign.
2. I shall not make my opponent's race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation an issue in my campaign.
3. I will condemn any appeal to prejudice based on race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation.
4. I shall not attack or question my opponent's patriotism.
5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement nor shall I tolerate or permit members of my campaign organization to engage in such activities.
6. I shall not tolerate nor permit members of my campaign organization to engage in activities designed to destroy or remove campaign materials or signs lawfully displayed on public or private property.
7. I shall not tolerate my supporters engaging in these activities which I condemn nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group which resorts to the methods and tactics that I hereby condemn.
8. I shall run a positive campaign emphasizing my qualifications for office and my positions on issues of public concerns and I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting an opponent's credibility.
10. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

Executed on this day 8 of June 2012.

WITNESSES:

[Signature]

BY CANDIDATE:

[Signature]
Signature
Chickie BRANDIMARTE
(Print Name)

STATE OF FLORIDA)
) SS.

COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 8 day of JUNE,

CHICKIE BRANDIMARTE who is personally known to me or who has produced

as identification and who did/did not take an oath.

WITNESS my hand and official seal, this 8 day of JUNE 2012.

[Signature]
(Signature of person taking acknowledgment)

LOUISE STILSON
(Name of officer taking acknowledgment)
typed, printed, or stamped

My commission expires:

106.1435 Usage and removal of political campaign advertisements.--

(1) Each candidate, whether for a federal, state, county, or district office, shall make a good faith effort to remove all of his or her political campaign advertisements within 30 days after:

- (a) Withdrawal of his or her candidacy;
- (b) Having been eliminated as a candidate; or
- (c) Being elected to office.

However, a candidate is not expected to remove those political campaign advertisements which are in the form of signs used by an outdoor advertising business as provided in chapter 479. The provisions herein do not apply to political campaign advertisements placed on motor vehicles or to campaign messages designed to be worn by persons.

(2) If political campaign advertisements are not removed within the specified period, the political subdivision or governmental entity has the authority to remove such advertisements and may charge the candidate the actual cost for such removal. Funds collected for removing such advertisements shall be deposited to the general revenue of the political subdivision.

(3) Pursuant to chapter 479, no political campaign advertisements shall be erected, posted, painted, tacked, nailed, or otherwise displayed, placed, or located on or above any state or county road right-of-way.

(4) The officer before whom a candidate qualifies for office shall notify the candidate, in writing, of the provisions in this section.

(5) This provision does not preclude municipalities from imposing additional or more stringent requirements on the usage and removal of political campaign advertisements.

History.--s. 1, ch. 84-221; s. 20, ch. 84-302; s. 14, ch. 87-224; s. 647, ch. 95-147.

Candidate's Name: Chickie Brandmate

Candidate's Signature: Chickie Brandmate

Date Received: June 8, 2012

Qualifying Officer's Name: Louise Stilson, City Clerk

Qualifying Officer's Signature: Louise Stilson

Date: 6-8-12

CITY OF DANIA BEACH, FLORIDA

PAYMENT RECEIPT

DATE 4-8-12

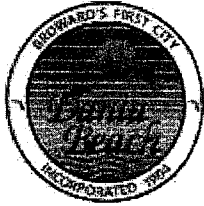
RECEIVED FROM:

**Campaign Account of
Chickie Brandimarte
101 SE 3rd Avenue #604
Dania Beach, FL 33004**

CODE			
	001-00-00-369-90-01		
	1% Election Assessment Fee		\$203.82
	November 6, 2012 Municipal Election		
	Check # 1002		
	Paid 4-8-12		
	TOTAL		\$203.82

CLERK Louise Stilson

CITY OF DANIA BEACH, FLORIDA				
PAYMENT RECEIPT				
DATE 6-8-12				
RECEIVED FROM:				
Campaign Account of Chickie Brandimarte 101 SE 3rd Avenue #604 Dania Beach, FL 33004				
CODE				
MC	Administrative Fee			\$100.00
	November 6, 2012 Municipal Election			
	Check # 100 2			
	Paid 6-8-12			
	TOTAL			\$100.00
CLERK	Louise Stilson			



CITY OF DANIA BEACH
POLITICAL SIGN
BOND AND PERMIT

TO WHOM IT MAY CONCERN:

The bearer of this permit will be allowed to erect political signs in the City of Dania Beach upon payment of a \$100.00 bond, said bond being refundable upon removal of said signs within 7 days after election for which candidate seeks office.

Acceptance of bond by City shall constitute an agreement between City and candidate providing that City may use all or part of said bond to cover removal of said signs if they are not removed within 7 days after the election.

Candidate Name: Chickie Branclimonte

Campaign Headquarter Address: 101 S.E. 3rd Ave
DANIA BEACH, FL 33004

Person Applying For Permit: Chickie Branclimonte

Telephone Number: 954-665-0292

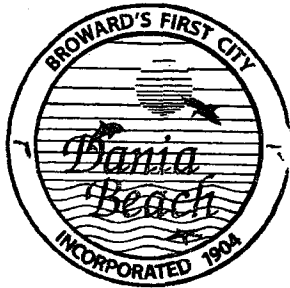
E-mail Address: CB319@AOL.COM

Date of Election: 11-6-12

Type of Election: City ___ County ___ State ___ Federal

Permit Date: 6-8-12

Amount of Bond: \$100.00



Authorized Signature: Louise Stilson
Louise Stilson, CMC, City Clerk

cc: Nicolas Lupo, Code Enforcement Manager

CITY OF DANIA BEACH, FLORIDA			
PAYMENT RECEIPT			
DATE	6-8-12		
RECEIVED FROM:			
Campaign Account of Chickie Brandimarte 101 SE 3rd Avenue #604 Dania Beach, FL 33004			
CODE			
	001-0000-220.11-04		
	Political Sign Bond		\$100.00
	November 6, 2012 Municipal Election		
	Check # 1002		
	Paid 6-8-12		
	TOTAL		\$100.00
CLERK	Louise Stilson		

PAYMENT DATE
06/08/2012

COLLECTION STATION
City Hall Window 1

RECEIVED FROM
Campaign Account of
Chickie Brandimarte

City of Dania Beach
100 W. Dania Beach Blvd.
Dania Beach, FL 33004

BATCH NO.
2012-09001166

RECEIPT NO.
2012-00071367

CASHIER
Finance Cashier I

DESCRIPTION
101 SE 3rd Ave. #604 Dania Beach, FL 33004

PAYMENT CODE	RECEIPT DESCRIPTION	TRANSACTION AMOUNT						
OT	Other 1% Election Assessment Fee for Nov. 6, 2012 Municipal Election	\$203.82						
MISC	Miscellaneous Administrative Fee for Nov. 6, 2012 Municipal Election	\$100.00						
OT	Other	\$100.00						
<p style="text-align: right;">Payments:</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Type</th> <th style="text-align: left;">Detail</th> <th style="text-align: right;">Amount</th> </tr> </thead> <tbody> <tr> <td>Check</td> <td>1002</td> <td style="text-align: right;">\$403.82</td> </tr> </tbody> </table>	Type	Detail	Amount	Check	1002	\$403.82	
Type	Detail	Amount						
Check	1002	\$403.82						
Total Amount:		\$403.82						