

**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, Cia Sherman
(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 Lehigh Acres Fire, _____
(office) (district #)
4; I am a qualified elector of LEE 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.

X [Signature] (239) 247-7140 cialehighfire@gmail.com
Signature of Candidate Telephone Number Email Address

3910 21st St SW Lehigh Acres FL 33976
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 114926332

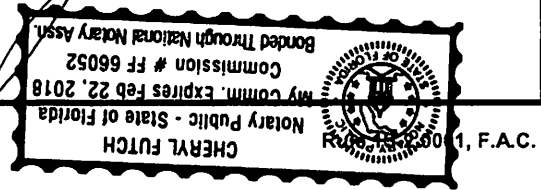
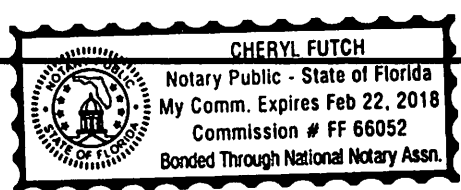
* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

STATE OF FLORIDA
COUNTY OF LEE

Sworn to (or affirmed) and subscribed before me this 21 day of June, 2016.

Personally Known: _____ or
Produced Identification: X
Type of Identification Produced: FLDL

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



114926332



LEE COUNTY ELECTIONS

Candidate and Committee Campaign Financial Reporting System Affidavit

The Lee County Supervisor of Elections provides its own Campaign Financial Reporting System for the filing of campaign finance reports required in accordance with Sections 106.07(5), 106.0703(4), 106.071(1), FS 106.29(2) Florida Statutes. The Campaign Financial System (CFR System) facilitates the *electronic filing* of required campaign finance reports in lieu of filing original and signed campaign finance reports by hand delivery or standard mail.

11/11/2015 11:11:11 AM

Please indicate your position:
(If you hold more than one position, mark appropriate boxes.)

- 1. Candidate for Public Office
 - 2. Chairman—Executive Political Party
 - 3. Chairman—PC-Political Committee
 - 4. Principal Officer—ECO-Electioneering Organization
 - 5. Campaign Treasurer
 - 6. Deputy Campaign Treasurer
- (if candidate is also treasurer or a deputy treasurer, mark appropriate box for #5 or #6)*
- (if also serving as treasurer or a deputy treasurer, mark appropriate box for #5 or #6)*

7. Individual or person filing an Independent Expenditure or Electioneering Communication Report *(not same as #1 through #6)*

State of Florida
County of Lee

In using the Campaign Financial Reporting System provided by the Lee County Supervisor of Elections, my signature on this affidavit serves as certification of any campaign treasurer's report filed by me or on my behalf as a candidate for public office; as a campaign treasurer or deputy campaign treasurer; as a chairman for an executive political party committee or political committee, as a principal officer of an electioneering communication organization; as an individual or person filing an independent expenditure report; or as an individual or person filing an electioneering communication report.

I certify that I will examine each report for correctness and further certify to the accuracy and veracity of each report filed after such examination.

X	Lucia Sherman	05/20/2016
Signature	Print Name	Date

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

I, LUCIA SHERMAN

candidate for the office of COMMISSIONER LEIGH H ACKER'S FIRE CONTROL &
RESCUE DISTRICT, SEAT 4;

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

X 
Signature of Candidate

05/20/2014
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).

16JUN2014 11:58:11 AM EST

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

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)

LUCIA ISABEL SHERMAN

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

3910 21st STREET SW LEHIGH ACRES, FL 33976

4. Telephone

(239) 247 7140

5. E-mail address

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

COMMISSIONER LEHIGH ACRES FIRE CONTROL & RESCUE DISTRICT, SEAT 4

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

LUCIA SHERMAN

11. Mailing Address

3910 21st Street SW

12. Telephone

(239) 247 7140

13. City

Lehigh Acres

14. County

Lee

15. State

FL

16. Zip Code

33976

17. E-mail address

clatlehighfire@gmail.com

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

19. Name of Bank

BB & T

20. Address

9090 Daniel Pkwy

21. City

Fort Myers

22. County

Lee

23. State

FL

24. Zip Code

83912

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

05/20/2016

26. Signature of Candidate

X Lucia Sherman

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

I, Lucia Sherman, do hereby accept the appointment (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/21/16 Date

X Lucia Sherman Signature of Campaign Treasurer or Deputy Treasurer