CANDIDATE OATH – NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

Check box *only* if you are seeking to qualify as a write-in candidate:

| \Box | Write- | in | can | dic | lata |
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OFFICE USE ONLY

| Candidate Oath | |
|---|----------------------------|
| (Section 99.021(1)(a), Florida Statutes) | |
| I, John Teckorius | |
| (Print name above as you wish it to appear on the ballot. If your last name consists of two or hyphen, check box | er the end of qualifying. |
| am a candidate for the nonpartisan office of Moody River CDD | 1 |
| (Office) | (District #) |
| , 1 ; 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 have qualified for no other public office in the state, the term of which office or any part thereof runs of I seek; and I have resigned from any office from which I am required to resign pursuant to Section 9 and I will support the Constitution of the United States and the Constitution of the State of Florida. | concurrent with the office |
| Candidate's Florida Voter Registration Number (located on your voter information card): 11865378 | 89 |
| Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicated to be applicated to be a principle of the principle | |
| | |

Signature of Candidate

Telephone Number

Telephone Number

Telephone Number

Email Address

33903

Address

City

State

Signature of Notary Public

(239) 938-5333

177

Sworn to (or affirmed) and subscribed before me this

or Produced Identification:

TAMARIS A. LIPA NOTARY PUBLIC STATE OF FLORIDA Comm# FF131843 Expires 6/11/2018

Type of Identification Produced:

COUNTY OF <u>LEE</u>

iteckorius@comcast.net

Print, Type, or Stamp Commissioned Name of Notary Public below:





Primary Election on Tuesday, August 28, 2018

Canvassing Board Meetings and Logic and Accuracy Testing Schedule

Tommy Doyle, Supervisor of Elections (239) LEE-VOTE (533-8683) www.lee.vote

I. Tommy Doyle, Supervisor of Elections for Lee County,

Florida hereby give official notice of the Canvassing Board Meetings, and Logic and Accuracy Testing Schedule.

Events designated as 'if necessary' are conditional and subject to cancellation, based on whether the specific event must occur.

Please call the office or visit our website for public notices confirming dates, times and location(s).

| DATE | TIME | LOCATION | | MEETING PURPOSE | | |
|--|--|--|---------|---|--|--|
| CS-15-18 | 9 00 AM | Lee County Election Center 13*80 S Cleveland Ave., Fort Myers | | Test, by a random method of selection, the voting machines to be used in the election at Early Voting and at the precincts on Election Day | | |
| Wednesday | Immediately following | Lee County Elections Office Constitutional Complex | | Test the vote-by-mail ballot tabulating equipment to be used in the election. Canvass of the vote-by-mail ballots received to date for the election. | | |
| 08-20-18 Monday 08-24-18 Enday | 9 (O AM | 2480 Triompson St., Fort Myers Lee County Elections Office Constitutional Complex 2480 Triompson St., Fort Myers | | Review of vote-by-mail ballots, if necessary | | |
| C8-28-18 | 2 00 PM and 5 00 PM | Lee County Elections Office | | Review of vote-by-mail ballots if necessary | | |
| Tuesday Election Day | 7 00 PM | Constitutional Complex 2480 Thompson St., Fort Myers | | Review of vote-by-mail ballots, if any and receive "unofficial" election highly results from the precincts. | | |
| ••• | | | | Canvass of provisional ballots if any. Prepare and submit 1º unofficinesuts to the Department of State by NOON Finday, 08-31-11 Determine if machine recount is required in any local contest(s). If machine recount is required conduct the machine recount according to the recount schedule below. | | |
| CR-31-18 Friday | 9 CO AM | Lee County Elections Office Constitutional Complex 2480 Thompson St. Fort Myers | | Secretary of State to determine if machine recount is required to federal, state and multi-county contest(s) after 1° unofficial results and notify affected counties. | | |
| | | | | If a machine recount is required, conduct the machine recount according to the schedule below. | | |
| | | | | If no recounts are required, certify the election and official resul Submit the Conduct of Election Report. Select the contest a precinct(s) for the post-election manual audd. | | |
| 09-05-18 Wodnesday | 9-93 AM - 5-00 PM each day necessary if a manual recount is conducted a post-election manual audit is not required. | Lee County Elections Office Constitutional Complex 2420 Thompson St. Fort Myers | | Begin post-election manual audit. The results will be announce immediately following completion of the audit. Deadline to complete it post-election manual audit is 11.59 PM the 7th day following certification of the election. | | |
| ONLY Events | IN THE EVENT OF A MAC designated as "if necessar | y" are conditional and subject to | cancell | OLLOWING ADDITIONAL MEETING DATES APPLY ation based on whether the specific event must occur. confirming dates, times and location(s). | | |
| DATE | TIME | LOCATION | | MEETING PURPOSE | | |
| 09-01-18 Saturday | 9 00 AM Logic and accuracy testing for their witing record of | | OR | Hinecessary logic and accuracy lesting for the machine recount. Test tabulate edupment to be used in the machine recount all the Lee County Elections Office. Constitutional Complex, or the Lee County Election Center or both lockwiss. Waching recognitismits the conducted in the orditable 1997 for the control of the control. | | |
| erensian, | 11 150 | Clear of the factor of the service o | | Release by the office a vector, twelve to a prince the ideograph plans, and a prince the ideograph plans. | | |
| Machine Recount(s) | | | | If necessary continue and I high machine recount prepare and unoffice resultor submession to the state by 3.00 PM, Sunday, 09-02-18, and determine froight unofficial results if manual recount is needed for local contest(s) only. | | |
| Minual Recountis) 09-01-18 Saturday | 9-00 AM each day until finished | Manual recounts conducted at: Lee County Elections Office Constitutional Complex (Auditorium) | | Semerary of State to order manual recount so for federal, state and multi-coor contest(s), if recessary in any total contest(s), togan and conduct to the manual recount in necessary in any total contest(s), togan and conduct to | | |
| through 09-04-18 Tuesday | See deadlines in MEETING PURPOSE | 2480 Thumpson St., Fort Myers | | manual recount untit finished tha manual recount is necessary in any federal, state or muth-countly contest; begin recount upon antification by the Serretary of State | | |
| if necessary | | | | The results from the manual recount are contained in the certification of toolficial results. | | |
| D8-31-18 Finday through D9-34-18 Tuesday | 9.00 AV on any day necessary | Lee County Elections Office Constitutional Complex (Auditorum) 2480 Thompson St., Fort Myers | | Deadline to suporit official results to the Department of State is 5.00 P. Turksian 0904-18. Suporit official results and certify the election. Supor Conduct of Section Resort. Seent the contest and precinctial for the projection manual audit. | | |
| og-05-18 | 9 00 AM = 5 00 PM each day necessary | Lee Cramy Electors Office Constitutional Complex 2480 Thompson St. First Dyers Neetings and Logic and Accuracy Testing | | Bogin post-election manual audit. The results will be announced immedials between completion of the audit. Deadine to condete the post-election manual. | | |

General Election on Tuesday, November 6, 2018

Canvassing Board Meetings and Logic and Accuracy Testing Schedule

Tommy Doyle, Supervisor of Elections (239) LEE-VOTE (533-8683) www.lee.vote

I, Tommy Doyle, Supervisor of Elections for Lee County.

Florida hereby give official notice of the Canvassing Board Meetings, and Logic and Accuracy Testing Schedule.

| | | | tices confirming dates, times and location(s). | | |
|--|--|--|---|--|--|
| DATE | TIME | LOCATION | MEETING PURPOSE | | |
| | - | | Test, by a random method of selection, the voting machines to be used in | | |
| | 9.00 AM | Lee County Election Center 13180 S Cleveland Ave. Fort Wyers | election at Early Voting and at the predicts on Election Day | | |
| 10-17-18 | | 15190 5 GEVESSIONES OF THE | ercor ment rong reality a president control of | | |
| Meseculi, . | | Lee County Elections Office | | | |
| | immediately following | Constitutional Complex | Test the vote-by-mail ballot tabulating equipment to be used in the emotion | | |
| | | 2480 Thompson St. Fort Myers | | | |
| 10-22-18 | | Lee County Elections Office | Canvass of the vote-by-mail botton received to date for the election | | |
| Monday | 9 00 AM | Constitutional Complex 2480 Thorioson St. Fort Myers | Causass of the Appetive, Se option reported to the election. | | |
| 10-26-18 | | 240 10 053 31 101 1/01 | | | |
| Friday | | Lee County Elections Office | | | |
| | 9 30 AM | Constitutional Complex | Review of vote-by-mail ballots, 1 necessary | | |
| 11-01-18 | | 2450 Thompson St., Fort Myers | | | |
| Thursday | | | | | |
| *1-06-16 | NOON, 3 00 PM, and 6 00 PM | Lee County Elections Office | Review of vote-by-mail ballots, if necessary | | |
| Tuesday | | Constitutional Complex | Review of vote-by-mail ballots, if any and receive "unofficial" election in | | |
| Election Day | 7 00 PM | 2490 Thompson St., Fort Myers | results. | | |
| | | | Canvass of provisional ballots and write-in votes if any. Prepare and submit | | |
| | | E | unofficial results to the Department of State by NOON, Sarurday, 11-10- | | |
| | | | Determine if machine recount is required in any local contest(s). If a machine recount is required, conduct the machine recount according to the recount | | |
| | | Lee County Elections Office | | | |
| 11-09-18 Friday | 1 00 PM | Constitutional Complex | schedule below. | | |
| ~11 | | 2480 Thomoson St. Fort Myers | Secretary of State to determine if much ne recount is required for federal ist | | |
| | | i | and multi-county contest(s) after 1st unofficial results and notify affected count | | |
| | | 1 | If a machine recount is required, conduct the machine recount according to schedule below. | | |
| | | ļ | scredule below | | |
| | | Lee County Electrons Office | : Canvass and count overseas vote-by-mail batiots. If no recounts are retrain | | |
| *1-16-16 Foday | NOON | Constitutional Complex | certify the election and official results. Submit the Conduct of Election Rep | | |
| | | 2480 Thompson St. Fort Myers | Select the contest and precinct(s) for the post-election manual audit | | |
| | 9 00 AM - 5 00 PM | | | | |
| | wach day necessary | | | | |
| 11-19-18 | -acritary necessary | Lee County Elections Office | Begin post-election manual audit. The results will be announced immediat | | |
| | | | | | |
| Monday | f a manual recount is | Constitutional Complex | following completion of the audit. Deadine to complete the post-election man | | |
| Monday | conducted a post-election | 2480 Thompson St. Fort Myers | following completion of the audit. Druxdine to complete the post-election manual tis 11 59 PM the 7h day following confrication of the election. | | |
| | conducted la post-election manual audit is not required. | 2460 Thompson St. Fort Myers | following completion of the audit. Disadine to complete the post-effection man- audit is 11.59 PM the 7h day following confrication of the election. | | |
| ONLY | connected a post-election manual aport is risk required IN THE EVENT OF A MACH | 2460 Thompson St., Fort Myers HINE OR MANUAL RECOUNT, 1 | Islawing considered the audit. Dividing to consider the post-inforced man- audit is 11.59 PM bits 71 day following certification of the decision. THE FOLLOWING ADDITIONAL MEETING DAYES APPLY. | | |
| ONLY | conducted a post-election marcus/audit is not required IN THE EVENT OF A MACH designated as "if necessary" | 2460 Trompson St. Fort Myers HINE OR MANUAL RECOUNT, 1 are conditional and subject to c | blicking condeteen of the audit. Deadons a complete the post-infection man audit is 11.59 PM the 7th day following conflication of the election. THE FOLLOWING ADDITIONAL MEETING DATES APPLY ancellation based on whether the specific event must occur. | | |
| ONLY Events | conducted a post-election marcus/audit is not required IN THE EVENT OF A MACH designated as "if necessary" | 2460 Thompson St. Fort Myers HINE OR MANUAL RECOUNT, 1 are conditional and subject to coor visit our website for public no | lation of condetand of the sudt. Deviden to complete the solicitation man- ual time 159 PM that The day following contribution of the election. THE FOLLOWING ADDITIONAL MEETING DATES APPLY ancellation based on whether the specific event must occur, tices confirming dates, times and location(s). | | |
| ONLY | conducted a post-election marcus/audit is not required IN THE EVENT OF A MACH designated as "if necessary" | 2480 Trempson St. For Myers HINE OR MANUAL RECOUNT, 1 are conditional and subject to c or visit our website for public no LOCATION | lation of condetand the sudt. Devider to complete the solit-election man- audit is 11.59 PM that Thiday following centrication of the election. THE FOLLOWING ADDITIONAL MEETING DATES APPLY ancellation based on whether the specific event must occur, tices confirming dates, times and location(s). MEETING PURPOSE | | |
| ONLY Events | conducted a post-election minutal audit in not required IN THE EVENT OF A MACH designated as "if necessary" Please call the office | 248C Trempson St. For Myers HINE OR MANUAL RECOUNT, 1 are conditional and subject to c or visit our website for public no LOCATION Lee County Elections Office | lation og concidence of the sudst. Devider to complete the sock-efficient man- aud to 11 59 PM that 71 day following centrication of the electron THE FOLLOWING ADDITIONAL MEETING DATES APPLY ancellation based on whether the specific event must occur. these confirming dates, times and location(s). MEETING PURPOSE If necessary logic and accuracy set inglice in making received. Test tabula | | |
| ONLY Events DATE | concated a post-tercord in the EVENT OF A MACH designated as "if necessary Please call the office TIME 900AM | 246C Trempson St. Fort Myses HINE OR MANUAL RECOUNT, if are conditional and subject to coor visit our website for public not LOCATION Less County Elections Office Constitutions Complex | tible in granulation of the sudt. Devider to complete the solicitation man- audit in 1159 PM that in day following certification of the election. THE FOLLOWING ADDITIONAL MEETING DATES APPLY ancellation based on whether the specific event must occur, tices confirming dates, times and location(s). MEETING PURPOSE Thesessay logical accuracy extra for the machine record in the Lee County Elections Of equipment to be used in the makine record and the Lee County Elections Of | | |
| ONLY Events | consisted a posi-election minutural audition for required IN THE EVENT OF A MACK designated as "if necessary Please call the office TIME 9 00 AM Logic and accuracy lesting for | 248C Trempson St. For Myers HINE OR MANUAL RECOUNT, 1 are conditional and subject to c or visit our website for public no LOCATION Lee County Elections Office | lotion by concluding of the sudst. Devider to complete the societies man- aud to 115 PAI bits 77 day following centification of the electron THE FOLLOWING ADDITIONAL MEETING DATES APPLY ancellation based on whether the specific event must occur. tices confirming dates, times and location(s). MEETING PURPOSE If necessary logic and accuracy, set ing for the matrice recoin. Test tabula OR (supprent to be used in the matrice recoin). The tabula of its constraints of the control that the control terior or belief for both fination. | | |
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By signing below, I acknowledge that I have received a copy of these Canvassing Board Meeting and Logic and Accuracy Testing Schedules. My attendance is not mandatory but welcome.

Signature: Date: Date: 6-6-19

| FORM 1 | FORM 1 STATEMENT O | | | 2017 | | | |
|--|--|---|---------------------------|---|--|--|--|
| Please print or type your name, mailing address, agency name, and position below: | print or type your name, mailing FINANCIAL INTER | | | FOR OFFICE USE ONLY: | | | |
| LAST NAME - FIRST NAME - MIDDLE TECHORUS JOLI MAILING ADDRESS: | | | 184 | | | | |
| 13180 GRAY K | | | 岩 | | | | |
| N. FI MYERS - CITY: MODER RIVER C | | | ??PM0210: | | | | |
| NAME OF AGENCY: SCAT NAME OF OFFICE OR POSITION HEL | | | 18APRZ7PMOZ10 SOE Lee CoF | | | | |
| You are not limited to the space on the lin | ts, if necessary. APPOINTEE | | <u> </u> | | | | |
| **** BOTH DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU! YEAR OR ON A FISCAL YEAR. PLE EITHER (must check one): | PARTS OF THIS SECT | HE PRECEDING TAX YEAR | , WHETH | IER BASED ON A CALENDAR | | | |
| DECEMBER 31, 20 | 17 <u>or</u> o specif | Y TAX YEAR IF OTHER THA | N THE C | ALENDAR YEAR: | | | |
| MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE 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). CHECK THE ONE YOU ARE USING (must check one): | | | | | | | |
| ☐ COMPARATIVE (P | ERCENTAGE) THRESHOLDS | OR CI DOLLA | AR VALU | IE THRESHOLDS | | | |
| PART A - PRIMARY SOURCES OF IN (If you have nothing to repo | COME [Major sources of income to out, write "none" or "n/a") | the reporting person - See inst | ructions) | | | | |
| NAME OF SOURCE OF INCOME | | SOURCE'S ADDRESS | | DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY | | | |
| | | | | | | | |
| NON | <u> </u> | | | | | | |
| | | | | | | | |
| PART B — SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") | | | | | | | |
| NAME OF NAME OF MAJOR SOURCES ADD | | ADDRESS OF SOURCE | | | | | |
| | | | | | | | |
| 11/4 | | | | | | | |
| / | ildian award by the conciling pares | n - See instructions | <u> </u> | | | | |
| PART C REAL PROPERTY [Land, b (If you have nothing to rep | m - See manuchonsj | FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. | | | | | |
| 7/1 | | INSTRUCTIONS on who must file this form and how to fill it out begin on page 3. | | | | | |
| / | | | | | | | |

| PART D — INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificate (If you have nothing to report, write "none" or "n/a") | es of deposit, etc See instructions] | | | | |
|--|--|--|--|--|--|
| TYPE OF INTANGIBLE | BUSINESS ENTITY TO WHICH THE PROPERTY RELATES | | | | |
| | | | | | |
| 1470 | | | | | |
| PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a") | • | | | | |
| NAME OF CREDITOR | ADDRESS OF CREDITOR | | | | |
| Nono | | | | | |
| | | | | | |
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or position | ons in certain types of businesses - See instructions? | | | | |
| (If you have nothing to report, write "none" or "n/a") | SS ENTITY # 1 BUSINESS ENTITY # 2 | | | | |
| NAME OF BUSINESS ENTITY | SS ENTITY I | | | | |
| 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 | | | | | |
| PART G TRAINING | | | | | |
| For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S. | | | | | |
| ☐ I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING. | | | | | |
| IF ANY OF PARTS A THROUGH G ARE CONTINUED O | N A SEPARATE SHEET, PLEASE CHECK HERE | | | | |
| SIGNATURE OF FILER: | CPA or ATTORNEY SIGNATURE ONLY | | | | |
| Signature: | If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or | | | | |
| | she must complete the following statement: | | | | |
| | I,, prepared the CE | | | | |
| The service of the se | Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the | | | | |
| Date Signed: | disclosure herein is true and correct. | | | | |
| bate digited. | CPA/Attorney Signature: | | | | |
| 4-21-11 | Date Signed: | | | | |
| FILING INSTRUCTIONS: | III | | | | |
| A AMALING ALLO A AND COMMISSIONS | | | | | |

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2017.