

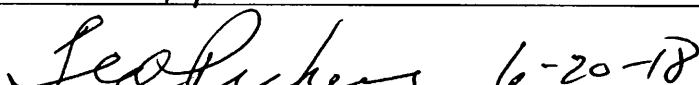


LEE COUNTY ELECTIONS

CANDIDATE CAMPAIGN FILE COVER SHEET

☒ ORIGINAL

☐ REVISED

Candidate Name	Theodore Lee Pickering Sr. (TED)		
Residence Address	6101 Industry Ave.		
City and Zip Code	Ft Myers. FL. 33905		
Mailing Address	☒ Check if same as above.		☐ Check if different from residence.
Telephone Number(s)	☐ Daytime (list below)	OR	☐ Alternate (list below)
	239 7078013		
Campaign Email Address	SLIDINBYE@AOL.COM		
Campaign Website			
Office Sought	Commissioner Seat 3		
Area, District, Group or Seat #	Tee FIRE + Rescue Dist.		
→ Judicial, School Board, Supervisor of Elections, and Special District Offices such as Community Development, Fire, Health System, Library and Mosquito Control are non-partisan offices. A candidate for any of these offices, must indicate "non-partisan" on the line below. → A candidate for a Constitutional Office or County Commission may file partisan or "No Party Affiliation" (NPA) and shall indicate a political party affiliation or "No Party Affiliation" on the line below.			
→ Political Party for Office Sought	None		
Incumbent	☒ Yes ☐ No		
Date of Birth or Voter Registration ID #	1-7-49		
Candidate Signature & Date	 6-20-18		

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website www.lee.vote or visit the following link: <http://www.lee.vote/campaigns/candidate-packets/> and <http://www.lee.vote/campaigns/candidate-finance-reports/>. Under Florida Law, a candidate's campaign-contact information, such as address, telephone number, and email address are available to the public. Do not hesitate to contact this office at (239) LEE-VOTE (239-533-8683) for more information about becoming a candidate for public office.

**CANDIDATE OATH –
NONPARTISAN OFFICE**

'18JUN20AM0900 SOE Lee Co FL

(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:

☐ Write-in candidate

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Ted Pickering

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box ☐. (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the nonpartisan office of Tice Fire (Office) _____ (District #) _____

3 ; 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 111466539

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]

X Ted Pickering (239) 707-8013 slidinbye@aol.com
Signature of Candidate Telephone Number Email Address
6101 Industry Ave Fort Myers FL 33905
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF LEE

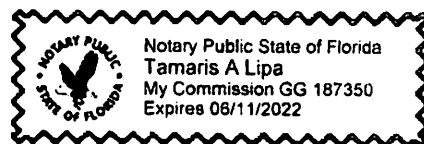
Tamaris A Lipa
Signature of Notary Public

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

Sworn to (or affirmed) and subscribed before me this 20th
day of June, 2018.

Personally Known: ☒ or Produced Identification: _____

Type of Identification Produced: _____



11/06/17



LEE COUNTY ELECTIONS

Affidavit of Intent Special District Candidates

A special district candidate is prohibited from financing ANY PORTION OF his/her campaign with personal funds except as provided in this affidavit.

State of Florida
County of Lee

I, TED PICKERING, am a candidate for the independent special
(print name)

district office of:

TICE FIRE + RESCUE SEAT 3
(include district name AND .district, seat, area or group #)

in the November 6, 2018, General Election. I declare that my only campaign expense, from personal funds, shall be the \$25 candidate-qualifying fee OR the signature verification fee for candidates who qualify by the candidate-petition method by submitting the valid signatures of 25 registered voters residing within the District boundaries.

Provided that this is my only campaign expense, 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. I understand that 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 additional campaign expense, I understand that prior to doing so, I am required to 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.

X TED PICKERING
Signature of Candidate

6-20-18
Date

FORM 1

STATEMENT OF
FINANCIAL INTERESTS

2017

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME:

Pickering Theodore LEE

MAILING ADDRESS:

6101 Industry Ave.

Falmes 33905 LEE

CITY: ZIP: COUNTY:

Tice Fire & Rescue Dept.

NAME OF AGENCY:

Fire Commissioner

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Sent 3

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, 2017 OR ☐ SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR 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 (PERCENTAGE) THRESHOLDS OR ☒ DOLLAR VALUE THRESHOLDS

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

(If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Social Security	USA	Retired
Tice Fire & Rescue	Lexington Ave	Fire District

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

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

(If you have nothing to report, write "none" or "n/a")

6101 Industry Ave

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.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
(If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

Synergy Stock

F.P.+L.

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

NAME OF CREDITOR

ADDRESS OF CREDITOR

1 _____

—

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

BUSINESS ENTITY # 1

BUSINESS ENTITY # 2

NAME OF BUSINESS ENTITY

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

None

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 ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

SIGNATURE OF FILER:

Signature:

Lee L. King

Date Signed:

5/6-18

CPA or ATTORNEY SIGNATURE ONLY

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 Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

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 returned.

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.



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.vot

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.

DATE	TIME	LOCATION	MEETING PURPOSE
11-18-18 Mon-Fri	9:30 AM	Lee County Election Center 13168 S Cleveland Ave., Fort Myers	Test by a random method of selected voting machines to be used in the election at Early Voting and at the precinct on Election Day
11-22-18 Tues	Immediately following 9:30 AM	Lee County Election Office County Central Complex 2480 Thompson St., Fort Myers Lee County Election Office County Central Complex	Test the vote-by-mail ballot tabulating equipment to be used in the election
11-23-18 Tues	9:30 AM	Lee County Election Office County Central Complex 2480 Thompson St., Fort Myers	Review of vote-by-mail ballots. Necessary
11-26-18 Thurs	NOON, 3:00 PM and 6:00 PM	Lee County Elections Office County Central Complex 2480 Thompson St., Fort Myers	Review of vote-by-mail ballots. Necessary
11-28-18 Sat	7:00 PM		Review of vote-by-mail ballots. If any and vote by mail election report results
11-28-18 Tuesday Election Day			Census of provisional ballots and absentee ballots. (Any request and submit 15 minutes prior to the Department of State by NOON, Saturday, 11-23-18. Determine if machine request is required in any local context; if a machine request is required conduct the machine request according to the request schedule below.
11-29-18 Friday	1:00 PM	Lee County Elections Office County Central Complex 2480 Thompson St., Fort Myers	Secretary of State to determine if such the request is required for Federal, State and multi-county contests after final unofficial results and locally affected counties. If a machine request is required, conduct the machine request according to the schedule below
11-16-18 Friday	NOON	Lee County Elections Office County Central Complex 2480 Thompson St., Fort Myers	Census and count overseas vote-by-mail ballots. If no requests are received for the election and official results. Submit the Conduct of Election Report. Submit the contest and precinct(s) for the post-election manual audit.
11-19-18 Mon-Fri	9:00 AM - 5:00 PM each day necessary 14 manual recounts conducted, a post-election manual audit is not required	Lee County Elections Office County Central Complex 2480 Thompson St., Fort Myers	Begin post-election manual audit. The results will be announced immediately following completion of the audit. Deadline to complete the post-election manual audit is 1:30 PM the 7 day following completion of the election.

ONLY IN THE EVENT OF A MACHINE OR MANUAL RECOUNT, THE FOLLOWING ADDITIONAL MEETING DATES APPLY

DATE	TIME	LOCATION	OR	MEETING PURPOSE
11-11-18 Sunday if necessary	9:00 AM Logic and accuracy testing for the machine recount if necessary	Lee County Elections Office Const/Liberal Complex 2480 Thompson St., Fort Myers Lee County Election Center 13180 S Cleveland Ave., Fort Myers		If necessary logic and accuracy testing for the machine recount. Last qualifying equipment to be used in the machine recount at the Lee County Elections Office (Constitutional Complex), or the Lee County Election Center or both locations. Machine recounts may be conducted at one or both locations. Please call the office or visit our website for public notices designating recount locations.
11-11-18 Monday if necessary	9:00 AM court day and if needed	Manual recounts conducted at: Lee County Elections Office Const/Liberal Complex (Autonomous) 2480 Thompson St., Fort Myers		1. necessary, continue and finish machine recount. Prepare the affidavits results for the machine recount by 3:00 PM. 2. If necessary, conduct a manual recount and individual results. If manual recount is needed for local contests only. Secretary of State to order manual recounts for local state and multi-county contests, if necessary. If a manual recount is necessary in any local contests, begin and conduct the manual recount until finished. If a manual recount is necessary in any state or multi-county contests, begin recount upon notification by the Secretary of State. The results from the manual recount are contained in the certification of the official results.
11-16-18 Friday if necessary	9:00 AM on any day necessary	Lee County Elections Office Constitutional Complex 2480 Thompson St., Fort Myers		Deadline to submit official results to the Department of State is NOON. Secretary of State will submit official results only after the Lee County Election Center Election Report. Select the contest and precincts for the post-election manual audit.
11-16-18 Monday if necessary	9:00 AM - 5:00 PM on any day necessary	Lee County Elections Office Const/Liberal Complex 2480 Thompson St., Fort Myers		Begin post-election manual audit. The results will be announced immediately following conclusion of the audit. Deadline to complete the post-election manual audit is 11:59 PM the 1 st day following completion of the election.

The Canvassing Board Meetings and Logic and Accuracy Testing are open to the public. Florida Statute 101.5612

Attendance is not mandatory but welcome

Attendance is not mandatory but welcome.

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Date: 06-28-98