



LEE COUNTY ELECTIONS

CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL

REVISED

Candidate Name	Mohamed J. Yasin		
Residence Address	3312 14 th St. W.		
City and Zip Code	Lehigh Acres, FL 33971		
Mailing Address	<input checked="" type="checkbox"/> Check if same as above.		<input type="checkbox"/> Check if different from residence.
Telephone Number(s)	<input checked="" type="checkbox"/> Daytime (list below)	OR	<input type="checkbox"/> Alternate (list below)
	(239) 292 8208		
Campaign Email Address	Feryasin@yahoo.com		
Campaign Website			
Office Sought	Lehigh Acres Fire Commissioner Seat 2		
Area, District, Group or Seat #	Seat 2		
<p>➔ 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.</p> <p>➔ 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.</p>			
➔ Political Party for Office Sought	NON.		
Incumbent	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Date of Birth or Voter Registration ID #	11-14-1952		
Candidate Signature & Date	Mohamed J. Yasin 6/21/2018		

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**

*18JUN21PM1227 SOE Lee Co F1

(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, M. YASIN

(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 Lehigh Acres Fire Commissioner, _____
(Office) (District #)

_____, 2; 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): 111391151

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 Chamed Yasin (239) 292 820 8 Feryasin@yahoo.com
Signature of Candidate Telephone Number Email Address

3312 14 St. W. Lehigh Acres FL 33971
Address City State ZIP Code

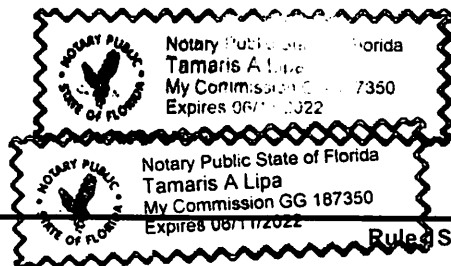
STATE OF FLORIDA
COUNTY OF LEE

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 21st
day of June, 2018.

Personally Known: _____ or Produced Identification:

Type of Identification Produced: FLDL



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)

mohamed J. Yasin

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

3312 14th St W.
Lehigh Acres, FL 33971

4. Telephone

(239) 292 8208

5. E-mail address

Feryasin@yahoo.com

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

Lehigh Acres Fire Commissioner
Seat 2

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

mohamed Yasin

11. Mailing Address

3312 14th St W, Lehi

12. Telephone

(239) 292 8208

13. City

Lehigh Acres

14. County

Lee

15. State

FL

16. Zip Code

33971

17. E-mail address

Feryasin@yahoo.com

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

19. Name of Bank

Preferred Community Bank

20. Address

2400 Lee Blvd

21. City

Lehigh Acres

22. County

Lee

23. State

FL

24. Zip Code

33971

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

6/21/2018

26. Signature of Candidate

X Mohamed J. Yasin

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

I, mohamed J. Yasin, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/21/2018
Date

X Mohamed J. Yasin
Signature of Campaign Treasurer or Deputy Treasurer

OFFICE USE ONLY

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)
(Please print or type)

I, Mohamed J. Yasin,

candidate for the office of Lehigh Acres Fire Commissioner
Seat 2

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

X Mohamed J. Yasin
Signature of Candidate

6/21/2018
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).

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

YOUSIN MOHAMED JAMALL

MAILING ADDRESS :

3312 14th St. W

Lehigh Acres 33971 Lee

NAME OF AGENCY :

Lehigh Acres Fire Commissioner # 2

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF [X] CANDIDATE OR [] NEW EMPLOYEE OR APPOINTEE

180UN21PM1226 SDF Lee Co Fl

**** 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
Military Retired		

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
None			

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

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

None

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
N/A	

PART E — LIABILITIES [Major debts - See instructions]
 (If you have nothing to report, 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]
 (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	N/A	
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 ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

Signature:

Chamed J. Yasin

Date Signed:

6/21/2018

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.



18 JUN 21 PM 12:26 SDE Lee Co FI



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 locations(s).

Table with columns: DATE, TIME, LOCATION, MEETING PURPOSE. Rows include: 08-15-18 Wednesday, 08-28-18 Tuesday Election Day, 08-31-18 Friday, 09-05-18 Wednesday.

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

Table with columns: DATE, TIME, LOCATION, MEETING PURPOSE. Rows include: 09-01-18 Sunday, 09-01-18 Monday, 09-04-18 Thursday, 09-05-18 Friday.

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

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: Mohamed J. Yassin
Name: MOHAMED J. YASSIN
Date: 6/21/2018

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.

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 locations(s).

Table with columns: DATE, TIME, LOCATION, MEETING PURPOSE. Rows include: 10-17-18 Wednesday, 10-22-18 Monday, 10-23-18 Tuesday Election Day, 10-25-18 Thursday, 11-02-18 Friday, 11-05-18 Monday, 11-06-18 Tuesday, 11-16-18 Friday.

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

Table with columns: DATE, TIME, LOCATION, MEETING PURPOSE. Rows include: 11-11-18 Sunday, 11-15-18 Thursday, 11-16-18 Friday, 11-19-18 Monday.

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

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: Mohamed J. Yassin
Name: MOHAMED J. YASSIN
Date: 6/21/2018