(Revised 04/03/2020)

CANDIDATE OATH NONPARTISAN OFFICE LEE MEMORIAL HEALTH SYSTEM LEE COUNTY TRAUMA SERVICES BOARD OF DIRECTORS

(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

*20JUN03PM0209 S0E Lee Co F1

OFFICE USE ONLY

Lee Memorial Health System candidates must use this Candidate Oath to qualify for office.

Wille-iii Calididate	
CANDIDATE OATH	
(Sections 99.021, 105.031, 876.05-876.10, Florida Statutes; Laws of Florida 2000-439)	
1. Tessica Carter Peer	
(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 LEE MEMORIAL HEALTH SYSTEM BOARD OF DIRECTORS (district #)	
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.	
I am a qualified elector of Lee County, Florida and I seek election to the Lee Memorial Health System and Lee County Trauma Services Board of Directors. I am a legal resident of Lee County, Florida and of the county health system district in Lee County to which I seek election. I am a citizen of the United States of America; I have not violated any of the laws of the state relating to electors and to the registration of electors.	
Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I am a citizen of the State of Florida and of the United States of America, and being employed by or an officer of and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.	
Candidate's Florida Voter Registration Number (located on your voter information card): 114125520	
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.] ———————————————————————————————————	
Signature of Candidate 352,598 0921 Jessica 4 lee hoa Hoogmail Telephone Number Email Address	con
4403 Watercolor Way Fort Myers FL 33966	
Address City State ZIP Code	
STATE OF FLORIDA	
COUNTY OF Lee	
Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: ANGEL More Jon	
Sworn to (or affirmed) and subscribed before me by physical or online_presence this 2 9 day of Mov , 20 70 . ANGEL R MOREJON	
Personally Known: or Produced Identification: Commission # GG 355243	
Type of Identification Produced: FI DI # C 43 / 112 C 27 - 6 70 - 1	

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ANGEL R MOREJON Commission # GG 355243 Expires July 15, 2023

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FORM 1	STATEM	IENT OF	2019				
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERESTS			FOR OFFICE USE ONLY:			
LAST NAME - FIRST NAME - MIDDL A HEY PEEN JUSS	ENAME: 1(a Clume		_ -	않			
MAILING ADDRESS: 4403 WOLLEY (islor way			JUN03			
	0			FM020			
NAME OF AGENCY:	23966 COUNTY:	Lee		20JUN03FM0209 SOE Lee Co F			
NAME OF OFFICE OR POSITION HE	ELD OR SOUGHT: Board OF	f Directors		eÇaF1			
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR	RAPPOINTEE					
**** THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2019.							
	ISING REPORTING THRESHOLING COMPARATIVE THRESHO). CHECK THE ONE YOU ARE IN PERCENTAGE) THRESHOLDS	DS THAT ARE ABSOLUTE I LDS, WHICH ARE USUALL USING (must check one): OR DOLLA	Y BASE				
PART A PRIMARY SOURCES OF IN (If you have nothing to rep	NCOME [Major sources of income to nort, write "none" or "n/a")	the reporting person - See instru	uctions)				
NAME OF SOURCE OF INCOME	AD	URCE'S DRESS Ft Music		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY			
Lea Health BOD Stipe	- 13003 D C 1 10 VII		Ţ	rustee			
Heal tstate	2180 W First St	: #520 FA. MX13,	Ke	al istate			
[Major customers, clients, a	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			
N/A							
1-/*/							
PART C REAL PROPERTY [Land, to rep		I on - See instructions]	lines o	re not limited to the space on the on this form. Attach additional s, if necessary.			
NIA			and w	G INSTRUCTIONS for when the state of the sta			
			this fo	RUCTIONS on who must file orm and how to fill it out on page 3.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stock (If you have nothing to report, write "none"	ks, bonds, certificates of deposit, etc See instructions]				
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
N/A					
DADT E LIADULTIES (Major debte See instructional					
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none"					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
NIA					
17 / 1					
DADT E INTERESTS IN SPECIEIED DIJSINESSES IO	numerable or positions in contain turns of hypinesses. Con instructional				
(If you have nothing to report, write "none" o	winership or positions in certain types of businesses - See instructions] or "n/a")				
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1 BUSINESS ENTITY # 2				
	7				
ADDRESS OF BUSINESS ENTITY	- Not pt				
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 annu	ual ethics training nursuant to section 112 3142 FS				
, , , , , ,	HAVE COMPLETED THE REQUIRED TRAINING.				
- TCERTIFF THAT I	TAVE COMPLETED THE REGUINED TRAINING.				
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON 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				
Signature.	in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:				
I II Dea	I,, prepared the CE				
Mu Cuth Fte	Form 1 in accordance with Section 112,3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the				
16.2	disclosure herein is true and correct.				
Date Signed:	CPA/Attorney Signature:				
5/27/2020	, ,				
	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), send it to CEForm1@leg.state.fl.us and retain a copy for your records. 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

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, 2019.



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

Canvassing Board Meeting Dates - August 18, 2020, Primary Election

Initial Canvass of Vote-by-Mail Ballots:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Monday, 07-27-20 at 9 AM

Logic and Accuracy Testing of the Tabulating Equipment or Voting Machines used at Early Voting and Election Day Precincts, and the Tabulating Equipment used for Vote-by-Mail Ballots:

Lee County Elections Center, 13180 S. Cleveland Ave., Fort Myers, 33907

Wednesday, 07-29-20 at 9 AM - Immediately Following Proceed to the Main Office (see below)

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Wednesday, 07-29-20

Review of Vote-by-Mail Ballots:

Lee County Elections Main Office. Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

- . 9 AM Each Meeting (see below)
- Friday, 07-31-20 Monday, 08-03-20 Wednesday, 08-05-20 Friday, 08-07-20
- Monday, 08-10-20 Wednesday, 08-12-20 Friday, 08-14-20 Monday, 08-17-20

Election Day

Review of Vote-by-Mail Ballots and Receive Preliminary Election Night Results:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

- Tuesday, 08-18-20
 - o NOON, 4 PM, and 6 PM until finished

Canvass of Provisional Ballots, Review of Vote-by-Mail Ballots, Submit 1st Unofficial Results, Submit Official Results, Certify the Election, Submit Conduct of Election Report, Random Selection of Race and Precinct(s) for the Post-Election Manual Audit:

Lee County Elections Main Office. Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Friday, 08-21-20 at 8 AM

Post-Election Manual Audit:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Wednesday, 08-26-20 at 9 AM

In the event of a machine or manual recount, the additional dates of 08-22-20 through 08-25-20 will apply.

Canvassing Board Meeting Dates - November 3, 2020, General Election

Logic and Accuracy Testing of the Tabulating Equipment or Voting Machines used at Early Voting and Election Day Precincts, the Tabulating Equipment used for Vote-by-Mail Ballots, and the Initial Canvass of Vote-by-Mail Ballots:

Lee County Elections Center, 13180 S. Cleveland Ave., Fort Myers, 33907

Monday, 10-12-20 at 9 AM - Immediately Following Proceed to the Main Office (see below)

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Monday, 10-12-20

Review of Vote-by-Mall Ballots:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

- 9 AM Each Meeting (see below)
- Wednesday, 10-14-20 Friday, 10-16-20 Monday, 10-19-20
- Wednesday, 10-21-20 Friday, 10-23-20 Monday, 10-26-20
- Wednesday, 10-28-20 Friday, 10-30-20 Monday, 11-02-20

Election Day

Review of Vote-by-Mail Ballots and Receive Preliminary Election Night Results:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Tuesday, 11-03-20

o 9 AM, NOON, 3 PM, and 5 PM until finished

Canvass of Provisional Ballots, Review of Vote-by-Mail Ballots, Submit 1st Unofficial Results:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Friday, 11-06-20 at 2 PM

Canvass of Overseas Vote-by-Mail Ballots, Submit Official Results, Certify the Election, Submit Conduct of Election Report, Random Selection of Race and Precinct(s) for the Post-Election Manual Audit:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Friday, 11-13-20 at NOON

Post-Election Manual Audit:

Lee County Elections Main Office, Melvin Morgan Constitutional Complex, 2480 Thompson St., 3rd Floor, Fort Myers, 33901

Wednesday, 11-18-20 at 9 AM

In the eyeqt of a machine or manual recount, the additional dates of 11-08-20 through 11-14-20 will apply.

()	/ I am a candidate for loca	l office and have received a copy	of the above schedules.	,	1
X	Carro Pee	N Jessila (arter Peer	5/27	2020
Signature.		Print Name		Date	