



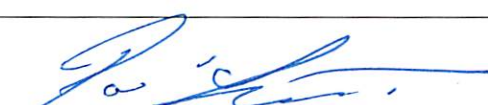
# LEE COUNTY ELECTIONS

\*22JUN15AM1130 SOE LEE CO F1

## CANDIDATE CAMPAIGN FILE COVER SHEET

 ORIGINAL

 REVISED

Candidate Name	Paul Martin Louwers		
Residence Address	856 N Town & River RD		
City and Zip Code	Ft. Myers, FI 33919		
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)
	239-826-4407		
Campaign Email Address	plouwers@auto-video.com		
Campaign Website			
Office Sought	Commissioner		
Area, District, Group or Seat #	Seat#1-Iona McGregor Fire Protection & Rescue District		
<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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Date of Birth or Voter Registration ID #	06-01-1964		
Candidate Signature & Date	 <span style="float: right;">6/15/22</span>		

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website [www.lee.vote](http://www.lee.vote) or visit the following link: <https://www.lee.vote/Candidates/Candidate-Online-Packets>. Under Florida Law, a candidate's campaign-contact information, such as address, telephone number, and email address are available to the public. If you have questions or need more information about becoming a candidate for public office, please call (239) LEE-VOTE (239-533-8683) and ask for the Qualifying Department.

06/21/21



# 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, Paul Martin Louwers, am a candidate for the independent special  
(print name)

district office of:

Iona McGregor Fire Protection & Rescue District Seat 1  
(include district name AND .district, seat, area or group #)

in the November 8, 2022, 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   
Signature of Candidate

06-15-2022  
Date

**CANDIDATE OATH  
NONPARTISAN OFFICE**

22 JUN 15 AM 11:30 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, Paul Martin Louwers,

(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 Commissioner - JONA Mc GREGOR R 150,  
(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 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): 111712496

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.]

Paul Louwers

X [Signature] (239) 826-4407 plouwers@quto-video.com  
Signature of Candidate Telephone Number Email Address

856 N Town & River Dr Ft. Myers Florida 33919  
Address City State ZIP Code

STATE OF FLORIDA  
COUNTY OF LEE

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

Sworn to (or affirmed) and subscribed before me by means of  
online notarization  OR physical presence   
this 15 day of JUNE, 2022

Personally Known  OR Produced Identification   
Type of Identification Produced: FL DL



**FORM 1**

**STATEMENT OF FINANCIAL INTERESTS**

**2021**

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :  
 LOUWERS PAUL MARTIN

MAILING ADDRESS :  
 856 NORTH TOWN & RIVER DR.

CITY : ZIP : COUNTY :  
 FORT MYERS 33919 LEE

NAME OF AGENCY :  
 Iona-McGregor Fire Protection & Rescue District

NAME OF OFFICE OR POSITION HELD OR SOUGHT :  
 Commissioner *Seat 1*

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

**COPY**

2021JAN15PM1130 SEC LEE COP1

\*\*\*\* THIS SECTION MUST BE COMPLETED \*\*\*\*

**DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.

**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
Automotive Video Innovations, I	6280 Arc Way, Ft. Myers, FL 33966	Automotive Training Videos/Live

**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")

6280 Arc Way, Ft. Myers FL, 33966

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

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
Shareholder	Automotive Video Innovations, Inc.
Stocks-Detail Equity Sector Analysis	See Attached Page

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
Synovus Bank	7900 Summerlin Lakes Dr.

**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")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	None	
ADDRESS OF BUSINESS ENTITY	None	
PRINCIPAL BUSINESS ACTIVITY	None	
POSITION HELD WITH ENTITY	None	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	None	
NATURE OF MY OWNERSHIP INTEREST	None	

**PART G — TRAINING** For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 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:



Date Signed:

6/15/2022

**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), 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 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, 2021.

FORM 1 PART D CONTINUED

DETAIL OF EQUITY SECTOR ANALYSIS

CONSUMER COMM

ALPHABET  
COMCAST  
META PLATFORMS  
VERIZON

DISCRETIONARY

ADVANCE AUTO  
AMAZON  
BOOKINGS  
DOLLAR GENERAL  
HOME DEPOT  
WALT DISNEY CO  
LOWES  
MCDONALDS  
MOTORCAR  
NIKE  
O'REILLY  
STARBUCKS  
TARGET  
JTX  
VF CORP

CONSUMER STAPLES

BRITISH AMBER  
COCA COLA  
COSTCO  
DIAGEO  
WALMART  
ESTEE LAUDER  
SYSCO  
PROTOR & GAMBLE

FINANCIALS

DISCOVER  
GOLDMAN  
INTERNATIONAL  
DOUBLELINE SHILLER  
AMERICAN FUNDS  
JP MORGAN  
MARSH  
MORGAN STANLEY  
PRUDENTIAL FINANC  
S&P GLOBAL

TRAVELERS  
TRUIST  
WELLS FARGO  
AMX  
AMERIPRISE  
BLACKLOCK  
CHUBB  
BLACKSTONE  
CME

HEALTH CARE

ABBOTT  
DANAHER  
ABBVIE  
AMGEN  
BOSTON SCIENTIFIC  
CVS  
INTUITIVE  
MEDTRONICS  
MERCCK  
NOVARTIS  
JOHNSON &  
JOHNSON  
PFIZER  
BECTONCONOCO  
THERMO FISHER  
SCIENTIFIC  
UNITED HEALTH

INDUSTRIALS

3M  
CATERPILLAR  
EATON  
EMERSON  
HONEYWELL INT INC  
LOCKHEED MARTIN  
NORFOLK  
RAYTHEON  
UPS  
UNION PACIFIC  
NORFOLK STHN  
PARKER HANNIFIN  
REPUBLIC SERVICES

ROCKWELL  
AUTOMATION  
RESIDEO  
WASTE MGMNT

INFORMATION TECH

ACCENTURE PLC  
ADOBE SYSTEMS  
ANALOG  
APPLE  
APPLIED  
AUTOMATIC DATA  
BROADCOM  
CISCO  
FIDELITY  
INTEL  
MICROSOFT  
PAYCHEX  
SALESFORCE  
TEXAX INST  
VISA INC CLA

REAL ESTATE

CROWN CASTLE  
AMERICAN TOWER  
PROLOGIS

UTILITIES

ALLIANT  
AMER ELECTRIC  
CONS EDISON  
NEXERTA  
SOUTHERN

ENERGY

CONOPHILIPS  
EOG RESOURCES  
PHILLIPS 66  
EXXON