



**LEE COUNTY  
ELECTIONS**

'24JUN04PM0204 SOE Lee Co FI

**CANDIDATE CAMPAIGN FILE COVER SHEET**
☒ **ORIGINAL**
☐ **REVISED**

<b>Candidate Name</b>	Neil S Price		
<b>Voter Registration ID #</b>	122232329		
<b>Residence Address</b>	11844 Princess Grace Ct		
<b>City and Zip Code</b>	33991		
<b>Mailing Address</b>	<input checked="" type="checkbox"/> Check if same as above.		<input type="checkbox"/> Check if different from residence.
<b>Telephone Number(s)</b>	<input checked="" type="checkbox"/> Daytime (list below)	OR	<input type="checkbox"/> Alternate (list below)
	248-760-2462		
<b>Campaign Email Address</b>	Same		
<b>Campaign Website</b>	n/a		
<b>Office Sought</b>	Fire Commissioner		
<b>Area, District, Group or Seat #</b>	Matlacha Pine Island Fire Control District Seat 2		
➔ Judicial, School Board, and Special District Offices such as Community Development, Fire, Lee Health System, Library and Mosquito Control are non-partisan offices. A candidate for 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.			
➔ <b>Political Party for Office Sought</b>	non-partisan		
<b>Incumbent</b>	<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No
<b>Date of Birth</b>	09/26/1951		
<b>Candidate Signature &amp; Date</b>	 5/10/24		

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/Archived-Candidate-Lists>. 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.



# LEE COUNTY ELECTIONS

\*24JUN04PM0205 SOE Lee Co F1

## 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  
Neil Price

I, \_\_\_\_\_ am a candidate for the independent special  
(print name)

district office of: Matlacha Pine Island Fire Control District Seat 2

(include district name AND .district, seat, area or group #)

in the **November 5, 2024 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 Florida Division of Elections.

X

Signature of Candidate

5/10/24

Date

**FS 106.021(1)(a)** No person shall accept any contribution or make any expenditure with a view to bringing about his or her nomination, election, or retention in public office, or authorize another to accept such contributions or make such expenditure on the person's behalf, unless such person has appointed a campaign treasurer and designated a primary campaign depository.



**General Information**

Name: Mr Neil S Price

Address: 11844 PRINCESS GRACE CT, CAPE CORAL, FL 33991

PID 286529

County: Lee

**AGENCY INFORMATION**

Organization	Suborganization	Title
Matlacha-Pine Isl. Fire Con. Dstrct.	Board of Commissioners	Fire Commissioner Seat 2

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
Special District	Matlacha Pine Island Fire Control District	Fire Commissioner Seat 2

**Disclosure Period**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023 .

**Primary Sources of Income**PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person)  
(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	PO Box 2000 Richmond, CA 94802	US Social Security Benefit
Northern Trust / Schlumberger	PO Box 830943 Birmingham AL	Pension Benefit Schlumberger
5th3rd Securities	38 Fountain Square, Cincinnati OH 45263	IRA Distributions

**Secondary Sources of Income**

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (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			

**Real Property**

REAL PROPERTY (Land, buildings owned by the reporting person)  
(If you have nothing to report, write "none" or "n/a")

Location/Description
N/A

**Intangible Personal Property**

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000)  
(If you have nothing to report, write "none" or "n/a")

Type of Intangible	Business Entity to Which the Property Relates
Bank Accounts	5th 3rd Bank
IRA Mutual Funds	5th 3rd Securities
IRA Stocks managed portfolio	Morgan Stanley



**Liabilities**

LIABILITIES (Major debts valued over \$10,000):

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

Name of Creditor	Address of Creditor
Newrez Mortgage	PO Box 619063 Dallas, TX 75261
5th3rd Bank	38 Fountain Square, Cincinnati, OH 45263

**Interests in Specified Businesses**

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)

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

**Business Entity # 1****Training**

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

**Signature of Filer**

***Neil S Price***

Digitally signed: 05/31/2024

Filed with COE: 05/31/2024

**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:

☐ Write-in candidate

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OFFICE USE ONLY

**Candidate Oath**

Name to appear on ballot: Neil Price

Check box if two last names without hyphen. ☐ (Name cannot be changed after qualifying.)

Check box if name includes nickname. ☐ (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the nonpartisan office of Matlacha Pine Island Fire Commissioner, 15  
(Office) (District #)  
2; I am a qualified elector of Lee County, Florida.  
(Circuit #) (Group or Seat #)

I am a qualified elector 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.

**Statement of Outstanding Fines, Fees, or Penalties**

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).

YES, I Do ☐ NO, I Do Not ☒

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

**X** Neil Price (248) 760-2462 neilprice@yahoo.com  
Signature of Candidate Telephone Number Email Address  
11844 Princess Grace Ct Cape Coral FL 33991  
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF Lee

Sworn to (or affirmed) and subscribed before me by means of

online notarization ☐ OR physical presence ☒

this 10th day of May, 2024.

Personally Known ☐ OR Produced Identification ☒

Type of Identification Produced: D.L.

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

