

This Candidate Oath has been modified for Lee Memorial Health System Board of Directors candidates only!

(Revised 05/01/12)

CANDIDATE OATH

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

Lee Memorial Health System  
candidates must use this  
Candidate Oath for  
candidate-qualifying  
purposes.

OFFICE USE ONLY

OATH OF CANDIDATE

(Sections 99.021, 105.031, 876.05-876.10, Florida Statutes; Laws of Florida 2000-439)

I, Kenneth James Morris  
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT \* -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of LEE MEMORIAL HEALTH SYSTEM BOARD OF DIRECTORS,  
(office) (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, 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.

X Kenneth J Morris (239) 590 6936 Ken33908@yahoo.com  
Signature of Candidate Telephone Number Email Address

MORRIS, KENNETH JAMES  
11580 ISLE OF PALMS DR  
FORT MYERS BEACH FL 33931  
State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 111349920

\* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

STATE OF FLORIDA  
COUNTY OF Lee

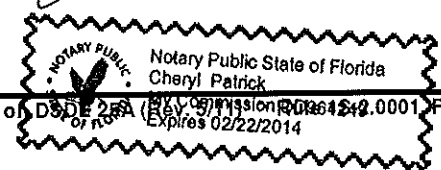
Sworn to (or affirmed) and subscribed before me this 22 day of MAY, 2012.

Personally Known: \_\_\_\_\_ or

Produced Identification: X

Type of Identification Produced: FLDL

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



# SHARON L. HARRINGTON SUPERVISOR OF ELECTIONS LEE COUNTY - FLORIDA

<b>PHYSICAL ADDRESS</b> LEE COUNTY CONSTITUTIONAL COMPLEX 2480 THOMPSON STREET 3 <sup>RD</sup> FLOOR FORT MYERS FL 33901	<b>MAILING ADDRESS</b> please send all correspondence to this address P O BOX 2545 FORT MYERS FL 33902-2545
MAIN OFFICE 239 LEE VOTE (239-533-8683)	FAX (239-533-6310) WEBSITE: www.leeelections.com

## Canvassing Board Meetings and Logic and Accuracy Testing Schedule

I, Sharon L. Harrington, Supervisor of Elections for Lee County, Florida do hereby give official notice of the Canvassing Board Meetings and Logic and Accuracy Testing schedule for the August 14, 2012 Primary Election as follows:

EARLY VOTING DATES		EARLY VOTING TIMES		
Saturday 08-04-12 through Saturday 08-11-12		9:00 AM to 5:00 PM on Saturdays and Sunday 10:00 AM to 6:00 PM Monday through Friday		
EARLY VOTING LOCATIONS				
Main Office - Fort Myers Lee County Constitutional Complex (corner of Fowler and Martin Luther King Jr. Blvd) 2480 Thompson St - 3 <sup>rd</sup> Floor, Fort Myers 239-LEE-VOTE (239-533-8683)	Bonita Springs Branch Office Coconut Commerce Center 24951 Old U S 41 Rd #10, Bonita Springs 239-949-1581	Cape Coral Branch Office (behind the Lee County Government Center) 1031 S E 9 <sup>th</sup> Pl #3 Cape Coral 239-533-7031	Election Center Branch Office (across from the Bell Tower Shops) 13180 S Cleveland Ave Fort Myers 239-533-6918	East Lee County Regional Library (Meeting Room) 881 Gunner Rd Lehigh Acres 239-LEE-VOTE (239-533-8683)
DATE	TIME	EVENT	LOCATION	PURPOSE
08-02-12 Thursday	9:00 A.M.	Logic And Accuracy Testing	Lee County Election Center 13180 S Cleveland Ave Fort Myers 33907	Test, By A Random Method Of Selection, The Voting Machines To Be Used In The Election During Early Voting And At The Precincts On Election Day.
08-02-12 Thursday	Immediately Following	Test Mail Ballot Tabulators Initial Canvass Of The Mail Ballots Received To Date	Location Change Lee County Elections Office Lee County Constitutional Complex 2480 Thompson Street 3 <sup>rd</sup> Floor Fort Myers 33901	Test The Mail Ballot Tabulating Equipment To Be Used In The Election.  Canvass The Mail Ballots Received To Date For The Election.
08-14-12 Tuesday Election Day	To Be Announced	Canvass Of Additional Mail Ballots Received  Receive Unofficial Election Night Results  Selection Of Race And Precinct(S) To Be Audited In The Post Election Manual Audit	Lee County Elections Office Lee County Constitutional Complex 2480 Thompson Street 3 <sup>rd</sup> Floor Fort Myers 33901	Canvass Of Additional Mail Ballots Received For The Election AND Receive "Unofficial" Election Night Results. Canvassing Board To Randomly Select A Race And Precinct(S) To Be Audited In The Post Election Manual Audit.
08-17-12 Friday	9:00 A.M.	Canvass Of Provisional Ballots  Official Certification Of The Election  Post Election Manual Audit	Lee County Elections Office Lee County Constitutional Complex 2480 Thompson Street 3 <sup>rd</sup> Floor Fort Myers 33901	Canvass Of Election Day Provisional Ballots Received From Precincts (If Any).  Official Certification Of The 08-14-12 Primary Election.  AUDITORIUM. Post Election Manual Audit Of A Randomly Selected Race And Precinct(S) For The Election. The Results Will Be Announced Immediately Following The Completion Of The Post Election Manual Audit.

I have received a copy of the Canvassing Board Meeting and Logic and Accuracy Testing Schedule for the August 14, 2012 Primary Election.

X <i>Kenneth J Morris</i> Signature	Kenneth J. Morris Print Name	5-22-12 Date
--	---------------------------------	-----------------

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

LAST NAME -- FIRST NAME -- MIDDLE NAME

111349920

MORRIS, KENNETH JAMES  
11580 ISLE OF PALMS DR  
FORT MYERS BEACH FL 33931

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

NAME OF AGENCY:

Lee Memorial HS Seat 3

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  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, 2011 OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (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 p. 4] (If you have nothing to report, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Retirement	Dept of Defense	Military
Social Security	SSA	Retirement

PART B -- SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must 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 p. 4] (If you have nothing to report, you must write "none" or "n/a")


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.

OTHER FORMS you may need to file are described on page 6.

ORIGINAL

ORIGINAL

**PART D — INTANGIBLE PERSONAL PROPERTY** [Stocks, bonds, certificates of deposit, etc. - See instructions p. 5]  
(If you have nothing to report, you must write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
IRA	Zurbruggen Financial Advisor

**PART E — LIABILITIES** [Major debts - See instructions p. 5]  
(If you have nothing to report, you must write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
Mortgage	BBVA
Credit Line	Wells Fargo

**PART F — INTERESTS IN SPECIFIED BUSINESSES** [Ownership or positions in certain types of businesses - See instructions p. 5]  
(If you have nothing to report, you must write "none" or "n/a")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
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			

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

**SIGNATURE (required):**

**DATE SIGNED (required):**

*Kenneth J Morris*

5-22-12

**FILING INSTRUCTIONS:**

**WHAT TO FILE:**

After completing all parts of this form, **including signing and dating it**, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

**NOTE:**

**MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

**WHERE TO FILE:**

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.

**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.)

**State officers or specified state employees** file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

**Facsimiles will not be accepted.**

**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** for publicly-elected local office must file at the same time they file their qualifying papers.

**Thereafter**, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

**Finally**, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does **not** relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.