

NON-PARTISAN CANDIDATE LOYALTY OATH

Sections 876.05-876.10, Florida Statutes

CANDIDATES WITH NO PARTY AFFILIATION

STATE OF FLORIDA
LEE COUNTY

SCANNED

PLEASE PRINT

FIRST NAME	MIDDLENAME/INITIAL	LAST NAME
ANDREW	C.	ASK

I am a citizen of the State of Florida and of the United States of America, and a candidate for public office, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE

Section 99.021 Florida Statutes

IMPORTANT NOTICE TO ALL CANDIDATES

READ CAREFULLY, YOU CANNOT CHANGE THE WAY YOU WANT YOUR NAME TO APPEAR ON THE BALLOT AFTER THE END OF QUALIFYING

PRINT NAME BELOW AS YOU WANT IT TO APPEAR ON THE **BALLOT**

I, ANDREW C. ASK, am a candidate for the

PLEASE PRINT NAME AS YOU WANT IT TO APPEAR **ON BALLOT**

office of Mosquito Control 7 DISTRICT

OFFICE

CIRCUIT

GROUP

I am a qualified elector of LEE County, Florida. I am

qualified under the Constitution and 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 which I am required to resign pursuant to Section 99.012, Florida Statutes.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.

SIGN HERE:

[Signature]
Signature of Candidate

07-17-00

Date Signed

5215 Del Prado Blvd

Mailing Address

(941) 980-0028

Daytime Telephone #

(941) 549-5821

Fax Telephone Number

CAPE CORAL, FL 33904-9718

City/ZIPCODE

FORM 1 STATEMENT OF FINANCIAL INTERESTS 1999

THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR ENDING:

NAME OF YOUR AGENCY:

CHECK EITHER OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

Mosquito Control

LAST NAME - FIRST NAME - MIDDLE NAME:

CHECK ONE OF THE FOLLOWING CATEGORIES:

ASK, Andrew C.

LOCAL OFFICER STATE OFFICER CANDIDATE

MAILING ADDRESS:

SPECIFIED STATE EMPLOYEE

5215 DEL PRADO BLVD

LIST OFFICE OR POSITION HELD OR SOUGHT Commissioner

CITY: CAPE CORAL

ZIP: 33904

COUNTY: LEE

AREA-7

NOTICE: Under provisions of Sec. 112.317, Florida Statutes, a failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000.

PART A - PRIMARY SOURCES OF INCOME [Sources exceeding 5% of gross income]

NAME OF SOURCE OF INCOME

SOURCE'S ADDRESS

DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY

Andrew C. Ask, P.E.

5215 DEL PRADO, CAPE CORAL FL

CONSULTING ENGINEER

PART B - SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]

NAME OF SOURCE OF BUSINESS ENTITY'S INCOME

SOURCES ADDRESS

DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY

IMPAC

900 W. MARLIN, PUNTA GORDA, FL

PRODUCTIVITY TRAINING

MAGUIRE ENGINEERING

6922 TATUM BLVD, NAPLES, FL

CONSULTING ENGINEERING

LEE MEMORIAL HOSPITAL

P.O. BOX 240, FLEMING, FL

HEALTH CARE

BGSW

1520 ROYAL PALM BLVD, FLEMING

AIRCRAFT

PART C - REAL PROPERTY [Land, buildings]

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 of this packet.

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

(Continued on p.2)

SCANNED

PART D -- INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
American Colonial Fund	KEOUGH / 401K / IRA
VANGUARD	KEOUGH VANGUARD Mutual Fund
STATE FARM INSURANCE	KEOUGH plan

PART E -- LIABILITIES IN EXCESS OF NET WORTH [Major debts]

NAME OF CREDITOR	ADDRESS OF CREDITOR
N/A	

PART F -- INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
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			

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

SIGNATURE:

DATE SIGNED:

FILING INSTRUCTIONS FOR FORM 1

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. Note: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: Local officers file with the Supervisor of Elections of the county in which you 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. Candidates file this form together with your qualifying papers. To determine what category your position falls under, see the "Who Must File" Instructions on page 3. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

WHEN TO FILE: Initially, each local officer, 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.

Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year they hold their positions. Candidates for publicly-elected state or local office must file at the same time they file their qualifying papers.

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CANVASSING BOARD MEETINGS

For

FALL 2000 ELECTIONS

FIRST PRIMARY

Friday September 1 @ 8:00 am	Canvass absentee ballots
Friday September 1 @ 1:00 pm	Test the tabulating equipment
Tuesday September 5 @ 8:00 am	Canvass absentee ballots
Wednesday September 6 @ 8:00	Certify the Election

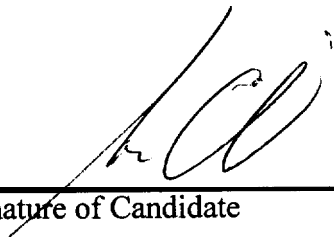
SECOND PRIMARY

Friday September 29 @ 8:00 am	Canvass absentee ballots
Monday October 2 @ 1:00 pm	Test the tabulating equipment
Tuesday October 3 @ 8:00 am	Canvass absentee ballots
Wednesday October 4 @ 8:00 am	Certify the Election

GENERAL ELECTION

Friday November 3 @ 8:00 am	Canvass absentee ballots
Monday November 6 @ 1:00 pm	Test the tabulating equipment
Tuesday November 7 @ 8:00 am	Canvass absentee ballots
Wednesday November 8 @ 8:00 am	Certify the Election

I acknowledge that I am in receipt of this notice.



Signature of Candidate

07-17-00

Date

SCANNED

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED