

NON-PARTISAN CANDIDATE LOYALTY OATH

Sections 876.05-876.10, Florida Statutes
CANDIDATES WITH NO PARTY AFFILIATION
STATE OF FLORIDA
LEE COUNTY

PLEASE PRINT

FIRST NAME	MIDDLE NAME/INITIAL	LAST NAME
KENNETH	G.	SONNE JR

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, Kenneth G. Sonne, Jr. am a candidate for the
PLEASE PRINT NAME AS YOU WANT IT TO APPEAR ON BALLOT

office of Commissioner, Lee County Mosquito Control, Dist. 1
OFFICE DISTRICT CIRCUIT

I am a qualified elector of Lee County, Florida. I am
GROUP

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:

Kenneth G. Sonne Jr.
Signature of Candidate

July 12, 2000
Date Signed

14400 Orange River Road (941) 694-7286 ()
Mailing Address Daytime Telephone # Fax Telephone Number

Fort Myers 33905
City/ZIPCODE

FORM 1 STATEMENT OF FINANCIAL INTERESTS 1999

THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR ENDING: CHECK EITHER DECEMBER 31, 1999 <input type="checkbox"/> OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: <input checked="" type="checkbox"/>	NAME OF YOUR AGENCY: <p style="font-size: 1.2em; margin-left: 20px;">Lee County Mosquito Control</p>
LAST NAME - FIRST NAME - MIDDLE NAME: <p style="font-size: 1.2em; margin-left: 20px;">SONNE, KENNETH GEORGE, JR</p>	CHECK ONE OF THE FOLLOWING CATEGORIES: <input checked="" type="checkbox"/> LOCAL OFFICER <input type="checkbox"/> STATE OFFICER <input type="checkbox"/> CANDIDATE <input type="checkbox"/> SPECIFIED STATE EMPLOYEE
MAILING ADDRESS: <p style="font-size: 1.2em; margin-left: 20px;">14400 ORANGE RIVER ROAD</p>	LIST OFFICE OR POSITION HELD OR SOUGHT: _____ <p style="font-size: 1.2em; margin-left: 20px;">Commissioner - District 1</p>
CITY: <u>FORT MYERS</u> ZIP: <u>33905</u> COUNTY: <u>LEE</u>	

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
Harvey Engelhardt Metz Funeral Homes	11600 Colonial Blvd Ft Myers FL 33907	Funeral Services

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

NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY

<p>PART C — REAL PROPERTY [Land, buildings]</p>	<p>FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.</p> <p>INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.</p> <p>OTHER FORMS you may need to file are described on page 6.</p> <p style="text-align: right;">(Continued on p.2) </p>
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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.

Scott S. Gunn
Signature of Candidate

7-12-00
Date

RECEIVED
OFFICE OF
SUPERVISOR
JUL 17 3 10 PM '00