FORM 1	STATEMI	ENT OF		2020
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL I	NTEREST	S FO	R OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE N	AME :			
umicz Sheldon	L			
MAILING ADDRESS :				
49 Testerman Ct				
city: ehigh Acres 339	ZIP: COUNTY:			
NAME OF AGENCY:	74 Lee			
CPFD		s was under the		
NAME OF OFFICE OR POSITION HELD	OR SOUGHT:			
ire fighter	Charles and the contract of th			
CHECK ONLY IF M CANDIDATE (DR NEW EMPLOYEE OR A	PPOINTEE		
***	the state of the s			
	* THIS SECTION MUST			
THIS STATEMENT REFLECTS YOU	R FINANCIAL INTERESTS FOR	CALENDAR YEAR EN	IDING DECEMB	ER 31, 2020
MANNER OF CALCULATING R	EDODTADI E INTEDESTO			
LICENS HAVE THE OPTION OF US	MC DEDODTING TUDESLICE	C TUAT ADE ADOQUUE		
FEWER CALCULATIONS, OR USIN (see instructions for further details).	G COMPARATIVE THRESHOLD	S WHICH ARE HOUSE	E DOLLAR VALI	JES, WHICH REQUIRES
(see instructions for further details).	CHECK THE ONE YOU ARE US	SING (must check one	LLY BASED ON	PERCENTAGE VALUES
COMPARATIVE (PE	RCENTAGE) THRESHOLDS		LAR VALUE TH	DECLIOL DO
PART A PRIMARY SOURCES OF INC	OME (Major sources of income to the		LAK VALUE TH	RESHOLDS
(If you have nothing to repo	rt, write "none" or "n/a")	e reporting person - See in	structions]	
NAME OF SOURCE OF INCOME		RCE'S RESS	DESCRIP	TION OF THE SOURCE'S
Fire fighter	19591 Ben Hill Griffin Pwky, Fort Myers,		PRINCIPAL BUSINESS ACTIVITY	
	FL, 33913	i wky, Folt Myers,	Fire protection	on
	22,00010			
PART B SECONDARY SOURCES O	FINCOME			
[Major customers, clients, ar (If you have nothing to rep	nd other sources of income to busines port, write "none" or "n/a")	ses owned by the reporting	person - See instru	ctions]
NAME OF	NAME OF MAJOR SOURCES	ADDRESS		
BUSINESS ENTITY	OF BUSINESS' INCOME	OF SOURCE	-	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
A STATE OF THE STA		Hert - Leading		
DADT O DEAL PROPERTY (
PART C REAL PROPERTY [Land, to find the control of the control	ourldings owned by the reporting persport, write "none" or "n/a")	on - See instructions]	lines on th	t limited to the space on the is form. Attach additional
n/a			sheets, if	necessary.
				ISTRUCTIONS for when re to file this form are
				at the bottom of page 2.
				CTIONS on who must file
				n and how to fill it out n page 3.

TYPE OF INTANGIBLE	none" or "n/a")	SINESS ENTITY TO WHICH THE PROPERTY RELATES		
Later to the state of the state			THE RESERVE THE THE PARTY OF THE PARTY.	
PART E — LIABILITIES [Major debts - See instruc- (If you have nothing to report, write "			the last grown is the control of the	
NAME OF CREDITOR	1	ADDRESS OF CREDITOR		
		1 1/1/15/15/16	SS OF GREENOR	
	55 S S S S S S S S S S S S S S S S S S	A STATE OF THE STA		
PART F — INTERESTS IN SPECIFIED BUSINESS	ES [Ownership or position	ns in cortain types of h		
(If you have nothing to report, write "	none of ma)	SS ENTITY # 1		
NAME OF BUSINESS ENTITY	BOSINES	S ENTIT # 1	BUSINESS ENTITY # 2	
ADDRESS OF BUSINESS ENTITY	none		none	
PRINCIPAL BUSINESS ACTIVITY	The Control of the Co		The state of the s	
POSITION HELD WITH ENTITY		S. Charten		
I OWN MORE THAN A 5% INTEREST IN THE BUS	SINESS	Resident Market of and		
NATURE OF MY OWNERSHIP INTEREST	Total Control of Control	No recent public of the		
PART G — TRAINING For elected municipal cagency created under Part III, Chapter 163 requ	officers, appointed school s	uperintendents, and cor	nmissioners of a	
	ired to complete annual ethi			
✓ I CERTIFY TH	HAT I HAVE COMP	LETED THE RE	QUIRED TRAINING.	
✓ I CERTIFY TH	HAT I HAVE COMP	LETED THE RE	EQUIRED TRAINING.	
I CERTIFY THE	G ARE CONTINUED	PLETED THE RE	HEET, PLEASE CHECK HERE	
I CERTIFY THE IF ANY OF PARTS A THROUGH SIGNATURE OF	G ARE CONTINUED	ON A SEPARATE S CPA or A	TTORNEY SIGNATURE ONLY	
I CERTIFY THE	G ARE CONTINUED	DN A SEPARATE S CPA or A If a certified public in good standing w	TTORNEY SIGNATURE ONLY accountant licensed under Chapter 473, or attorney the Florida Bar property this face.	
I CERTIFY THE IF ANY OF PARTS A THROUGH SIGNATURE OF	G ARE CONTINUED	DN A SEPARATE S CPA or A If a certified public in good standing w	TTORNEY SIGNATURE ONLY accountant licensed under Chapter 473, or attornwith the Florida Bar prepared this form for you, he de the following statement:	
I CERTIFY THE IF ANY OF PARTS A THROUGH SIGNATURE OF	G ARE CONTINUED	CPA or A If a certified public in good standing w she must complete I, Form 1 in accords	TTORNEY SIGNATURE ONLY accountant licensed under Chapter 473, or attorne with the Florida Bar prepared this form for you, he de the following statement: prepared the cance with Section 112 3145 Florida Statutes and the	
I CERTIFY THE IF ANY OF PARTS A THROUGH SIGNATURE OF Signature:	G ARE CONTINUED	CPA or A If a certified public in good standing w she must complete I, Form 1 in accorda instructions to the	TTORNEY SIGNATURE ONLY accountant licensed under Chapter 473, or attorney with the Florida Bar prepared this form for you, he can be the following statement: prepared the cance with Section 112.3145, Florida Statutes, and the form. Upon my reasonable knowledge and belief the communication of the comm	
I CERTIFY THE IF ANY OF PARTS A THROUGH SIGNATURE OF	G ARE CONTINUED	CPA or A If a certified public in good standing v she must complete I, Form 1 in accorda instructions to the disclosure herein	TTORNEY SIGNATURE ONLY accountant licensed under Chapter 473, or attorne with the Florida Bar prepared this form for you, he ce the following statement: , prepared the Co ance with Section 112.3145, Florida Statutes, and te form. Upon my reasonable knowledge and belief, te is true and correct.	
I CERTIFY THE IF ANY OF PARTS A THROUGH SIGNATURE OF Signature:	G ARE CONTINUED	CPA or A If a certified public in good standing w she must complete I, Form 1 in accorda instructions to the	TTORNEY SIGNATURE ONLY accountant licensed under Chapter 473, or attorney that the Florida Bar prepared this form for you, he de the following statement: , prepared the Cance with Section 112.3145, Florida Statutes, and the form. Upon my reasonable knowledge and belief, this true and correct.	

m 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 small address to 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

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.

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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.