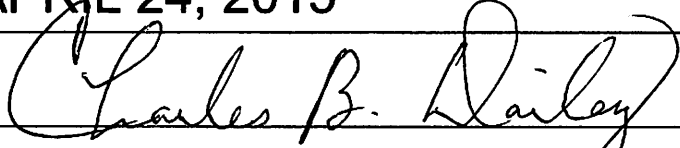


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL

REVISED

Candidate Name	CHARLES B. DAILEY			*15APR24PM 4:25:50E LEE CO FL
Residence Address	611 S.E. 17TH TERRACE			
City and Zip Code	CAPE CORAL, FL 33990			
Mailing Address	<input checked="" type="checkbox"/> Check if same as above.		<input type="checkbox"/> Check if different from residence.	
Telephone Number(s)	<input checked="" type="checkbox"/> Daytime (list below)	OR	<input type="checkbox"/> Alternate (list below)	
	(239) 980-3082			
Email Address	CHARLES.B.DAILEY@GMAIL.COM			
Office Sought	LEE COUNTY SCHOOL BOARD			
Area, District, Group or Seat #	AT-LARGE DISTRICT 6 <i>CB</i>			
<p>➤ Judicial, School Board, Supervisor of Elections, and Special District Offices such as Community Development, Fire, Health System, Library and Mosquito Control are non-partisan offices. A candidate for any of these offices, must indicate "non-partisan" on the line below.</p> <p>➤ 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.</p>				
➤ Political Party For Office Sought	NON-PARTISAN			
Date Of Birth or Voter Registration ID #	JUNE 5, 1952			
Date	APRIL 24, 2015			
Candidate Signature				

All candidate-qualifying documents and campaign finance reports will be posted at the Lee County Supervisor of Elections website www.leeelections.com or use the following link: http://www.precinctfind.com/cand_lee2.html . Under Florida Law, a candidate's campaign-contact information, such as address, telephone number, and email address are available to the public. Do not hesitate to contact this office at (239) LEE-VOTE (239-533-8683) for more information about becoming a candidate for public office.

*15APR24PM 4 25 50E LEE CO FL

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

CHARLES B. DAILEY

3. Address (include post office box or street, city, state, zip code)

611 S.E. 17 TERRACE
CAPE CORAL, FL 33990

4. Telephone

(239) 980-3082

5. E-mail address

Charles.B.Dailey@gmail.com

6. Office sought (include district, circuit, group number)

LEE COUNTY SCHOOL BOARD - AT-LARGE

DISTRICT 6 *CB*

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

SHIRLEY H. BURNS

11. Mailing Address

913 S.E. 23RD STREET

12. Telephone

(239) 671-1212

13. City

CAPE CORAL

14. County

LEE

15. State

FL

16. Zip Code

33991

17. E-mail address

Shirleyburns777@aol.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

FIFTH THIRD BANK

20. Address

2915 COLONIAL BLVD.

21. City

FORT MYERS

22. County

LEE

23. State

FL

24. Zip Code

33966

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

APRIL 24, 2015

26. Signature of Candidate

Charles B. Dailey

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, SHIRLEY H. BURNS, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

APRIL 24, 2015
Date

Shirley Burns
Signature of Campaign Treasurer or Deputy Treasurer

*15APR24PM 4 25 SOE LEE CO FL

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

**NOTE: This form must be on file with the qualifying
officer before opening the campaign account.**

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

CHARLES B. DAILEY

3. Address (include post office box or street, city, state, zip code)

611 S.E. 17 TERRACE
CAPE CORAL, FL 33990

4. Telephone

(239) 980-3082

5. E-mail address

Charles.B.Dailey@gmail.com

6. Office sought (include district, circuit, group number)

LEE COUNTY SCHOOL BOARD - AT-LARGE

DISTRICT 6

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

CHARLES B. DAILEY

11. Mailing Address

611 S.E. 17TH TERRACE

12. Telephone

(239) 980-3082

13. City

CAPE CORAL

14. County

LEE

15. State

FL

16. Zip Code

33990

17. E-mail address

Charles.B.Dailey@gmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

FIFTH THIRD BANK

20. Address

2915 COLONIAL BLVD.

21. City

FORT MYERS

22. County

LEE

23. State

FL

24. Zip Code

33966

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

APRIL 24, 2015

26. Signature of Candidate

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, CHARLES B. DAILEY, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

APRIL 24, 2015

Date

Signature of Campaign Treasurer or Deputy Treasurer

*15APR24PM 4 25 SOE LEE CO F1

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

CHARLES B. DAILEY

3. Address (include post office box or street, city, state, zip code)

611 S.E. 17 TERRACE
CAPE CORAL, FL 33990

4. Telephone

(239) 980-3082

5. E-mail address

Charles.B.Dailey@gmail.com

6. Office sought (include district, circuit, group number)

LEE COUNTY SCHOOL BOARD - AT-LARGE

DISTRICT 6

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

CARLETHA E. GRIFFIN

11. Mailing Address

3200 WILLIN STREET

12. Telephone

(239) 275-7078

13. City

FORT MYERS

14. County

LEE

15. State

FL

16. Zip Code

33916-5601

17. E-mail address

cega1956@embarqmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

FIFTH THIRD BANK

20. Address

2915 COLONIAL BLVD.

21. City

FORT MYERS

22. County

LEE

23. State

FL

24. Zip Code

33966

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

APRIL 24, 2015

26. Signature of Candidate

X Charles B. Dailey

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, CARLETHA E. GRIFFIN, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

APRIL 24, 2015

Date

X *[Signature]*
Signature of Campaign Treasurer or Deputy Treasurer

*15APR24PM 4 25 SOE LEE CO FL

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

CHARLES B. DAILEY

3. Address (include post office box or street, city, state, zip code)

611 S.E. 17 TERRACE
CAPE CORAL, FL 33990

4. Telephone

(239) 980-3082

5. E-mail address

Charles.B.Dailey@gmail.com

6. Office sought (include district, circuit, group number)

LEE COUNTY SCHOOL BOARD - AT-LARGE

DISTRICT 6 *CPD*

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

ROBERT BEAMON

11. Mailing Address

20499 SKY MEADOW LANE

12. Telephone

(773) 822-7383

13. City

NORTH FORT MYERS

14. County

LEE

15. State

FL

16. Zip Code

33917

17. E-mail address

bob.beamon1@gmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

FIFTH THIRD BANK

20. Address

2915 COLONIAL BLVD.

21. City

FORT MYERS

22. County

LEE

23. State

FL

24. Zip Code

33966

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

APRIL 24, 2015

26. Signature of Candidate

X Charles B. Dailey

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, ROBERT BEAMON, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

APRIL 24, 2015

Date

X Robert A. Beamon

Signature of Campaign Treasurer or Deputy Treasurer

OFFICE USE ONLY

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

I, CHARLES B. DAILEY

candidate for the office of Lee County School Board At-Large;

DISTRICT 6 *CB*

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

Charles B. Dailey
Signature of Candidate

4/24/15
Date

15 APR 24 PM 4:25 SOC LEE CO FL

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).