REVISED

MORIGINAL

LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	Robert F	ORREST					
Residence Address	13969 AVON PARK CIRCLE						
City and Zip Code	FT. MYERS, FL. 33912— Check if same as above. Check if different from residence.						
	Check if same as above.						
Mailing Address							
	Daytime (list below)	Alternate (list below)					
Telephone Number(s)	(239) 850- 7320	OR					
Email Address	RBF276@GMAIL.COM						
Office Sought	LEE County SHERIFF						
Area, District, Group or Seat #							
➤ 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. 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.							
> Political Party For Office Sought	NPA						
Date Of Birth							
or Voter Registration ID #	7/14/1957						
Date	5/21/15						
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.

*15MAY22PM 3 47 SOE LEE CO F1

OFFICE USE ONLY

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

1, ROBERT FORREST							
candidate for the office of LEE County SHERIFF;							
have been provided access to read and understand the requirements of							
Chapter 106, Florida Statutes.							
X Robert Jonest 5/21/15							
Signature of Candidate / Date							

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).

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 OF						ONLY				
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Depository Party										
2. Name of Candidate (in his order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip							
Robert Berner FORREST			code) P.O. Box 61357							
4. Telephone	5. E-mail address		Fort Myers, FL 33906							
(239) 850-7320	forrest4sheriff@gmai	il.com								
6. Office sought (include district, circuit, group number)		ber)	7. If a candidate for a <u>nonpartisan</u> office, check if applicable:							
Office of Lee County Sheriff			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										
10. Name of Treasurer or Deputy Treasurer										
Scott Moeggenberg							_			
11. Mailing Address				12.	Telep	hone				
1361 Royal Palm Square Blvd, Suite 1 (239) 841-3827										
13. City	14. County	15. State	e 16. Zip Code 17. E-mail address							
Fort Myers	Lee	FL	33919 scottm@vghcpa.com							
18. I have designated the following bank as my										
19. Name of Bank			D. Address							
Regions Bank 52			212 Summerlin Commons Blvd							
21. City	22. County		23. State			24. Zip Co	ode			
Fort Myers	Lee		FL			33907				
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 26. Signature of Candidate										
5/21/15 X Kount Q four 911-										
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
I,, do hereby accept the appointment										
(Please Print or Type Name)										
designated above as: Campaign Treasurer Deputy Treasurer.										
5/21/15 \$5/00000										
Date Signature of Campaign Treasurer or Deputy Treasurer										