

ORIGINAL

LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

☒ ORIGINAL☐ REVISED

15 JUL 9 AM 10 28 SDE LEE COM

Candidate Name	Carmen Salomé		
Residence Address	157 SE 27th Terrace		
City and Zip Code	Cape Coral, FL 33904		
Mailing Address Provide 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)
	239-745-5127		
Email Address	carmen.salome4@gmail.com		
Office Sought	Supervisor of Elections		
Area, District, Group or Seat #	Lee County		
<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.</p> <p>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 shall indicate a political party.</p>			
Political Party For Office Sought)	non-partisan		
Date Of Birth or Voter Registration ID #	08/29/59		
Date	4/9/15		
Candidate Signature	Carmen Salomé		

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.

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

ORIGINAL

15 JUL 9 AM 10:28 SDE LEE CO FL

I, Carmen Salomé ,
candidate for the office of Lee County Supervisor of Elections ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Carmen Salomé
Signature of Candidate

7/9/15
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).

*15 JUL 9 AM 1028 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)

ORIGINAL

**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)

Carmen Salomé

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

157 SE 27th Terrace
Cape Coral, FL 33904

4. Telephone

(239) 745-5127

5. E-mail address

carmen.salome4@gmail.com

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

Supervisor of Elections

**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

John David Salomé

11. Mailing Address

157 SE 27th Terrace

12. Telephone

(239) 560-0530

13. City

Cape Coral

14. County

Lee

15. State

FL

16. Zip Code

33904

17. E-mail address

jds1149@gmail.com

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

19. Name of Bank

BB&T

20. Address

2510 Santa Barbara

21. City

Cape Coral

22. County

Lee

23. State

FL

24. Zip Code

33904

**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

7/9/2015

26. Signature of Candidate

☒ *Carmen Salome*

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

I, John David Salome

, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

7/9/2015

Date

☒ *John David Salome*

Signature of Campaign Treasurer or Deputy Treasurer

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

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

(PLEASE PRINT OR TYPE)

ORIGINAL

**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)

CARMEN SALOME

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

157 S E 27TH TER
CAPE CORAL FL 33904

4. Telephone

(239) 745-5127

5. E-mail address

carmen.salome4@gmail.com

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

SUPERVISOR OF ELECTIONS

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

CARMEN SALOME

11. Mailing Address

157 S E 27TH TER

12. Telephone

(239) 745-5127

13. City

CAPE CORAL

14. County

LEE

15. State

FL

16. Zip Code

33904

17. E-mail address

CARMEN.SALOME4@GMAIL.COM

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

19. Name of Bank

BB&T

20. Address

2510 SANTA BARBARA BLVD

21. City

CAPE CORAL

22. County

LEE

23. State

FL

24. Zip Code

33904

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

07-09-2015

26. Signature of Candidate

X *Carmen Salome*

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

I, CARMEN SALOME, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☐

Campaign Treasurer

☒

Deputy Treasurer.

07-09-2015

Date

X

Carmen Salome

Signature of Campaign Treasurer or Deputy Treasurer