LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	CHRISTIAN MEISTER
Residence Address	PO BOX 6066Z
City and Zip Code	FORT MYERS, FL 33906
Mailing Address (if different)	Check if same as above.
Telephone Number(s) (Daytime)	786 390 4985 OR
Email Address	MEISTERFORSHERIFF@GMAIL, GOM
Office Sought	Lee County SHERIFF
Area, District, Group Or Seat Number	
Political Party (If Applicable)	NPA
Date Of Birth Or Voter ID #	114637270
Date	5/2/2008 (MAY)
Candidate Signature	X //

All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.

Candidates who provide an email address <u>may be</u> contacted by this office, via the email address provided by the candidate, for campaign related communications that pertain exclusively to the candidate's campaign.

All other mailings from this office, which pertain to every candidate, will be via United States Postal Service.



STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	OFFICE USE ONLY 슬
(PLEASE TYPE)	1970 - 19
CHECK APPROPRIATE BOX:	Pf04
✓ Original Appointment	Reappointment of Treasurer Secondary Depository
Name of Candidate CHRISTIAN MEISTER	Reappointment of Treasurer Secondary Depository Address (include post office box or street, city, state, zip code) PO BOX 60662 FORT MYERS, FL 33906
Telephone (optional) 2. Party (Partisan candidates only)	3. Office (add district, circuit, group number) Lee County SHERIFF
I have appointed the following person to act as my Camp	aign Treasurer Deputy Treasurer
4. Name of Treasurer or Deputy Treasurer CHRISTIAN MEISTER	C Telephone
5. Mailing Address (If post office box or drawer add street address	6. Telephone 786 390 4985
7. City 8. County FORT MYERS Lee County	9. State 10. Zip Code 339 O6
I have designated the following named bank as my	ry Depository Secondary Depository
11. Name of Bank SUNTRUST BANK	12. Street Address SIX TILE CYPRESS
13. City FORT MYERS LEE County	15. State 16. Zip Code
17. Signature of Candidate	Date May 2, 2008
Campaign Treasurer's Ac	ceptance of Appointment
, CHRISTIAN MEISTER (Please Print or Type)	, do hereby accept the appointment as
Campaign Treasurer Deputy Treasurer for the c	ampaign of CHRISTIAN MEISTER,
who is seeking nomination or election as a	(Party) candidate to the office of
Lee County SHERIFF . As a duly	registered voter in Lee County
County, Florida, I am qualified to accept this appointment. UNDER PENALTIES OF PERJURY, I DECLARE THAT I H. ACCEPTANCE OF APPOINTMENT AND	AVE READ THE FOREGOING CAMPAIGN TREASURER'S THAT THE FACTS STATED ARE TRUE.
MAY 2, 2008 X	
Date	Signature of Campaign Treasurer or Deputy Treasurer

08MAY02M041750EL == CoF1

STATEMENT OF CANDIDATE

(Section 106.023, F.S.) (Please Type)

Signature of Candidate

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I, CHRISTIAN	MEI	STER		,
candidate for the office of	Lee	County	SHERIFF	;
have received, read and under	rstand tł	ne requirem	ents of Chapter 106,	
Florida Statutes.				

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).

DS-DE 84 (Rev. 08/03)



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	LOYALTY OAT	Ή .		OFFIC	CE USE ONLY	
	CANDIDATES WITH NO PARTY A					Ę
	(Sections 876.05-876.10, Florida St			_ /		
	STATE OF FLORIDA			\bigvee		
	Lee , county					D.
	,					Ě
т	CHRISTIAN			ME	EISTER	, I
1,	First Name	Middle Nam	ne/Initial		Last Name	b
	tizen of the State of Florida and of th					
her	eby solemnly swear or affirm that I v	vill support the Co	nstitution of the	e United St	tates and of the	State of Florida.
	C	OATH OF C	ANDIDA	TF		
		(Section 99.021,				
I,	CHRISTIA	U MEI	STER			
,	(PLEASE PRINT NAME AS YOU WISH IT TO	APPEAR ON THE BALLOT	NAME MAY NOT B	E CHANGED AFT	TER THE END OF QUAL	LIFYING)
am	a candidate for the office of	SHERIF			<u>e</u> ,_	,
	. I am a qualified ele	(office)	Lee	•	strict) County Florida	(circuit) . I am qualified
-	(group)				oodiny, i londa	i. Tam quannou
hav with	er the Constitution and the Laws of e qualified for no other public office the office I seek, and I have resign 112, Florida Statutes,	in the state, the	term of which	office or a	iny part thereof	f runs concurrent
X		(7)	96) 390 ⁽	1985	MEISTERF @ GMAIL.	OR SHERIFF COM
7	Signature of Candidate	Dayt	ime Telephone N	lumber	Ema	il Address
	PO BOX 60662	FORT MY	IERS	FL	. 3	3906
Add	ress	City		State	!	ZIP Code
			12th	\\\		
Sw	orn to (or affirmed) and subscribe	ed before me this	/ / day	of Jun	. 200 <u>م کا</u>	
Pers	onally Known: or 🍃					\sim
			1	0		· ·
Prod	luced Identification:)	Derme	LKAM	ustell	elana
Туре	of Identification Produced:	,			- State of Florida sioned Name of No	otary Public
11.	236-100-68-223-0	2	. this i jpo of ot	with continuo	2. 27	
F	404	_		Commis Expires	Ramos Felician sion # DD58992 October 19, 201	7 0

FORM 6 FULL AND PUBLIC DISCL	OSUR	E OF	2007
FINANCIAL INTERI	ESTS		
LAST NAME — FIRST NAME — MIDDLE NAME: MEISTER CHRISTIAN FRANZ	FOR OFFIC USE ONLY:	J E	<u>ặ</u>
MAILING ADDRESS: PO ROX 60662			
10 201		ID Code	띷
CITY: ZIP: COUNTY: FORT MYERS 33906 Lee		ID No.	08JUN13FM1212SDE Lee Co F
NAME OF AGENCY: Lee County Sheriff's Office		Conf. Code	r r
NAME OF OFFICE OR POSITION HELD OR SOUGHTY!		P. Req. Code	
Lee County Sheriff CHECK IF THIS IS A FILING BY A CANDIDATE			
CHECK IF THIS IS A FILING BY A CANDIDATE (A)			
PART A NET WORTH			
Please enter the value of your net worth as of December 31, 2007, or a more current date. [Note: liabilities from your <i>reported</i> assets, so please see the instructions on page 3.] My net worth as of			
My not worth do of, as		- 	
PART B ASSETS			
HOUSEHOLD GOODS AND PERSONAL EFFECTS: Household goods and personal effects may be reported in a lump sum if their aggregate value es if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; other household items; and vehicles for personal use.	art objects; hou	. This category ii isehold equipme	ncludes any of the following, ent and furnishings; clothing;
The aggregate value of my household goods and personal effects (described above) is $\frac{3}{2}$	5 200		
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000: DESCRIPTION OF ASSET (specific description is required - see instruction	s p.4)		VALUE OF ASSET
TOYOTA COROLLA 2008			\$ 14,940
SUNTRUST BANK BANK ACCOUNT			Ø 1,539.
	A A A		
PART C LIABILITIES			
LIABILITIES IN EXCESS OF \$1,000: NAME AND ADDRESS OF CREDITOR			AMOUNT OF LIABILITY
SALLIEMAE PO BOX 9532 WILKES-BARI	RE PA	18773	
Student loans			\$ 53,292.04
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR			AMOUNT OF LIABILITY
NONE			
4TPbNTS23 20E Γ σ∈ Cο E1	1080 <u>.</u>		

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You may EITHER (1) file a complete copy of your 2007 federal income tax return, including all attachments, OR (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.						
I elect to file a copy of my 2007 federal income tax return. [If you check this box and attach a copy of your 2007 tax return, you need not complete the remainder of Part D.]						
PRIMARY SOURCES OF INCOME NAME OF SOURCE OF INCOME			ADDRESS OF SO	URCE OF INCOME		AMOUNT
KIDS HOPE UNITI	215 N. MI	LWAUKEE AU	e. LAKE VILLA.	1L 60046	\$10,772.15	
Agency for Workforce				STR. Tallahassa		\$ 1,007
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SECONDARY SOURCES OF INCO NAME OF BUSINESS ENTITY	ME [Major customers, clie NAME OF MAJOR OF BUSINESS' I	SOURCES	AC	reporting personsee DDRESS SOURCE	F	is]: PRINCIPAL BUSINESS CTIVITY OF SOURCE
NONE						
700,00						
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			•			
			IN SPECIFIED			
NAME OF	BUSINESS ENTITY		BUSINESS I			SINESS ENTITY #3
BUSINESS ENTITY ADDRESS OF	NONE	· · · · · · · · · · · · · · · · · · ·	NON	JE	/\/	IONE
BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY	A					
POSITION HELD WITH ENTITY						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				·		
NATURE OF MY OWNERSHIP INTEREST						
IF ANY OF PARTS A T	THROUGH E ARE CO	ONTINUED	ON A SEPARA	TE SHEET, PLEA	SE CHE	CK HERE 🔲
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OAT	H	STA	TE OF FLORIDA	Loo		
			INTY OF			12th
I, the person whose name appears a beginning of this form, do depose or		. Swo	rn to (or affirmed) a	and subscribed before	_	
and say that the information disclose	· · · · · · · · · · · · · · · · · · ·	\rightarrow	une	. 208 by CH	RISTIA	N MEISTER
and any attachments hereto is true,	/	1. 1	1 .	11	<i>,</i> .	
and complete.			eraue	K. Ell	lle	N
		(Sigi	nature of Notary Pu	SW// Bernice f	Ramos Fe	eliciano
				Commiss Expires	October 1	9, 2010
		(Prin	t, Type, or Stamp (Cuffings Connadatamen	of Notary F	EG951857019
SIGNATURE OF REPORTING OFFI	CIAL OR CANDIDATE	– Pers	onally Known	OR Produ	iced Identi	fication V
		Туре	of Identification P	roduced		<u>*</u>
EU INC INCIDICTIONS (n and where to file state	o form !-	antad at the ter-	of page ?		
FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3. OTHER FORMS you may need to file are described on page 6.						

CE FORM 6 - Eff. 1/2008 PAGE 2

FLORIDA DEPARTMENT OF ST CAMPAIGN TREASURE	ATE DIVISION OF ELECTIONS ER'S REPORT SUMMARY
(1) CHRISTIAN MEISTER Name	OFFICE USE ONLY 71
(2) P O BOX 60662, FORT MYERS, FL 33906 Address (number and street)	
City, State, Zip Code	
☐ CHECK IF ADDRESS HAS CHANGED (4) Check appropriate box(es): ☐ Candidate (office sought): SHERIFF ☐ Political Committee ☐ Committee of Continuous Existence ☐ Party Executive Committee ☐ Electioneering Communication	(3) ID Number CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED CHECK IF NO OTHER ELECTIONEERING
-	COMMUNICATION REPORTS WILL BE FILED IDENTIFIERS
Cover Period: From 10/31/2008 To	2/2/2009 / Report Type TR-4
☑ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT
Cash & Checks \$	Monetary Expenditures \$ 92.23
Loans \$ 0.00	Transfers to Office Account \$ 0.00
Total Monetary \$ 0.00	Total
In-Kind \$	Wionetary \$ 92.23
·	(8) Other Distributions 0.00
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$
• •	IFICATION
I certify that I have examined this report and it is true, correct, and complete. (Type name) Individual conty for electioneering commun.) X Signature	I certify that I have examined this report and it is true, correct, and complete. (Type name) Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
Signification (18/04)	Signature

(1) Name	CHRISTIAN MEISTER			(2) I.D. Numbe	r	1
	10/31/2008			/2/2009			
(3) Cover Perio	od///	throi	igh _	, _ , _ , _ , , , , , , , , , , , , , ,	(4) Pag	e 1	of 0
			<u> </u>		(.,		
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name			` , ,	` '	, ,	(· <i>y</i>
(6)	(Last, Suffix, First, Middle)					Ì	
Sequence	Street Address &		tributor	Contribution	in-kind		
Number	City, State, Zip Code	Type	Occupation	Туре	Description	Amendment	Amount
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(1) Name CHRI	STIAN MEISTER 10/31/2008	0.10.10000	(2) I.D. Numbe	r	71
(3) Cover Period	10/31/2008 1/throug	2/2/2009 h//	(4) Page1	of	1
(5) Date (6)	(7) Full Name (Last, Suffíx, First, Middi Street Address &	(8) Purpose e) (add office sought		(10)	(11)
Sequence Number	City, State, Zip Code	candidate)	Type	Amendment	Amount
	Meister, Christian F PO Box 60662 Fort Myers, FL 33906	distribut ion to candidate	DI		\$92.
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DS-DE 14 (Rev. 08/03)

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY				
(1) CHRISTIAN MEISTER Name	OFFICE USE ONLY 71			
(2) P O BOX 60662, FORT MYERS, FL 33906				
Address (number and street)				
•	/ <u>§</u>			
City, State, Zip Gode				
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:			
(4) Check appropriate box(es):				
X Candidate (office sought): SHERIFF	් 			
☐ Political Committee	(3) ID Number:			
Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED %			
☐ Party Executive Committee ☐ Electioneering Communication				
	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED			
(5) REPORT	IDENTIFIERS			
Cover Period: From 10/11/2008 To	10/30/2008 / Report Type G4			
▼ Original				
The second of th				
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT			
0-1-0-01-1	Monetary			
Cash & Checks \$ 500.00	Expenditures \$ 1,119.68			
Loans \$ 0.00	Transfers to Office			
	Account ©			
Total Monetary \$ 500.00	Total 0.00			
	Monetary \$ 1,119.68			
In-Kind \$ 0.00				
	(8) Other Distributions			
	\$0.00			
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date			
e	<i>*</i>			
Ψ 10,104.25	10,012.07			
(11) CERT	IFICATION			
It is a first degree misdemeanor for any pers	on to falsify a public record (ss. 839.13, F.S.)			
I certify that I have examined this report and it is true,	I certify that I have examined this report and it is true,			
correct, and complete.	correct, and complete.			
(Type name)	(Type name)			
Individual (only for election entry of commun.)	Candidate Chairperson (only for PC, PTY & election enting commun. organization)			
X/	Y Standard Commun. Organization)			
Signature	Signatura			
C C	Signature			

10/11/2008	(1) Name _	CHRISTIAN MEISTER		(3	2) I.D. Numb	er	71
(3) Cover Period		10/11/2008		10/30/2008			
Date Go Gas Stiffs, First, Middle) Sequence Steek Address & Clly, State, 2lp. Code Type Occupation Type Description Description Amount Amount S500.0	(3) Cover Pe		through	11	(4) Pa	ge1	of <u>1</u>
Date Go Gas Suffix, First, Middle) Street Addross & Gly, State, 216 Code Chairman, Frank so Creativism Drive Medington, CT 06111 1 Tetired CH Type Countributor Type CH S200.0 CH CH S200.0 CH CH CH CH CH CH CH C	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Sequence Number Cilis State Address & Countibutor Countibutor Type Countibutor Type Countibutor Type Countibutor Type Countibutor Chitarenza, Frank Scocketele briton Societale britanica Societale briton Societale briton Societale briton	Date						(,
Number City, State, Zip Code Type Occupation Type Description Amount Amount Spool of the control of the cont	(6)	(Last, Suffix, First, Middle)					
10/17/2008 80 Cesturine Drive Resignation, CT 96111 1		Street Address &	Contributor	Contribution	In-kind		
10/17/2008 ob Creative Drive Newington, CT 06111 1	Number			Туре	Description	Amendment	Amount
1	10/17/2008 / /	80 Crestview Drive	T retired	СН			\$500.0
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DS-DE 13 (Rev. 08/03) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES		-					
DS-DE 13 (Rev. 08/03) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							
DS-DE 13 (Rev. 08/03) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							
	DS-DE 13 (Rev. 08	3/03).	SEE REVERSE FOR	INSTRUCTIONS A	AND CODE VAL	UES	

(1) Name CHRISTIAN MEISTER	(2) I.D. Number	71
10/11/2008 10/30/2008		
(3) Cover Period/ through/	(4) Page <u>1</u>	_ of1

(3) Cover Perio	d/through		4) Page <u>1</u>	of	1
(5) Date (6) Sequence Number	Date Full Name (6) (Last, Suffix, First, Middle) Sequence Street Address &		(9) Expenditure Type	(10)	(11)
10/15/2008	Planet Press, 2157 Wilton Drive Wilton Manors, FL 33305	cards	МО		\$199.28
10/28/2008	Graphix Shop, 12541 Metro Parkway # 10 Fort Myers, FL 33966	signs	МО		\$918.90
10/30/2008	Lee County Sheriff's Office, 14750 Six Mile Cypress Parkway Fort Myers, FL 33912	public record request	МО		\$1.50
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// / / / / / / / / / / / / / / / / / /					-

FLORIDA DEPARTMENT OF ST CAMPAIGN TREASURE	ATE DIVISION OF ELECTIONS R'S REPORT SUMMARY
(1) CHRISTIAN MEISTER	OFFICE USE ONLY 71
Name	
(2) P O BOX 60662, FORT MYERS, FL 33906	
Address (number and street)	
City, State, Zip Code	
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:
(4) Check appropriate box(es):	
Z Candidate (office sought): SHERIFF	
Political Committee	CHECK IF PC HAS DISBANDED
Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED
☐ Party Executive Committee	
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING
	COMMUNICATION REPORTS WILL BE FILED
(5) REPORT	IDENTIFIERS
9/27/2008	10/10/2008
Cover Period: From/	Report Type G3
☑ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT
Cash & Checks \$1,140.00	Monetary Expenditures \$ 530.00
Loans \$	Transfers to Office Account \$ 0.00
Total Monetary \$ 1,140.00	Total 0.00
-	Monetary \$ 530.00
In-Kind \$	
	(8) Other Distributions
	\$
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$8,892_39_
·	IFICATION
	ion to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete:
(Type name)	(Type name)
Individual (only for Treasurer Deputy Treasurer	Candidate Chairperson (only for PC, PTY &
electione ring commun.)	efectioneering commun. organization)
X	X
Signature	Signature

DS-DE 12 (Rev. 08/04)

(1) Name	CHRISTIAN MEISTER			······································	(Z) 1.D. Numb	ei7	'1
	9/27/2008		1	0/10/2008			
(3) Cover Per	iod//	thr	ough	11	(4) Pag	ge <u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	Contributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10/1/2008	Meister, Christian PO Box 60662 Fort Myers, FL 33906		candidate for sheriff	СН	contribut ion by candidate		\$550.00
1							
10/7/2008 / /	Dennis, Peter 1555 Coconut Drive Fort Myers, FL 33901	I		СН			\$20.00
2							
10/9/2008 / /	Meister, Christian PO Box 60662 Fort Myers, FL 33906	I	candidate for sheriff	CA	contribut ion by candidate		\$70.00
3							
10/10/2008	Dequaine, Lester 3140 Sundance Circle Naples, FL 34109	1	retired	СН			\$500.00
4							
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(1) Name CHRI	CAMPAIGN TREASURER' STIAN MEISTER	(2) LD Number 71				
(3) Cover Period	9/27/2008 d/through_	10/10/2008	(4) Page		1	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought contribution to a candidate)	if Expenditure Type	(10)	(11) Amount	
10/1/2008	Quick Signs, 5565 Lee Street, Unit 5 Lehigh Acres, FL 33971	signs	MO		\$530.0	
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FLORIDA DEPARTMENT OF ST CAMPAIGN TREASURE	TATE DIVISION OF ELECTIONS ER'S REPORT SUMMARY
(1) CHRISTIAN MEISTER Name (2) P O BOX 60662, FORT MYERS, FL 33906	OFFICE USE ONLY 71
Address (number and street) City, State, Zip Code	
☐ CHECK IF ADDRESS HAS CHANGED (4) Check appropriate box(es): ☐ Candidate (office sought): SHERIFF	(3) ID Number:
☐ Political Committee ☐ Committee of Continuous Existence ☐ Party Executive Committee	CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
(5) REPORT Cover Period: From 9/13/2008 To	IDENTIFIERS 9/26/2008 Report Type G2
☑ Original ☐ Amendment ☐ Special Election	n Report
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT
Cash & Checks \$520.00	Monetary Expenditures \$ 530.00
Loans \$	Transfers to Office Account \$ 0.00
Total Monetary \$ 520.00 In-Kind \$ 0.00	Total Monetary \$ 530.00
TI-KIIQ •	(8) Other Distributions 0.00
(9) TOTAL Monetary Contributions To Date \$8,464_25_	(10) TOTAL Monetary Expenditures To Date \$8,362.39_
` ,	TIFICATION
It is a first degree misdemeanor for any personal certify that I have examined this report and it is true, correct, and complete. (Type name) Individual (only for electioneering commun.)	I certify that I have examined this report and it is true, correct, and complete. (Type name) Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
X Signature	Signature
1.160 ap 7.100 GC	// Marks/ / HINK .

<u>(</u> 1) Name	CHRISTIAN MEISTER	(2) I.D. Number						
	9/13/2008			9/26/2008				
(3) Cover Per	iod / /	thr			(4) Pag	e	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
9/22/2008 / /	Zuidema, Nina 12995 S. Cleveland Ave. # Fort Myers, FL 33907	I	**************************************	CA	5554.161.01		\$20.00	
1								
9/23/2008 / /	McEwan, Gerri 25 Temple Ct. Lehigh Acres, FL 33936	I	retired	CH			\$500.00	
2								
1 1		700000000000000000000000000000000000000						
<i>I</i>						e e e e e e e e e e e e e e e e e e e		
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(1) Name <u>CHRIS</u>	TIAN MEI	STER				(2) I.D. Nun	ber	•	71	
	9/13/2	800		9/26/20	08	. ,		•		
(3) Cover Period _	/	<u></u>	through_		_/	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
9/25/2008	Quick Signs, 5565 Lee Street, Unit 5 Lehigh Acres, FL 33971	signs	МО		\$500.00
9/26/2008	Quick Signs, 5565 Lee Street, Unit 5 Lehigh Acres, FL 33971	signs	МО		\$30.00
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FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) CHRISTIAN MEISTER Name (2) P O BOX 60662, FORT MYERS, FL 33906 Address (number and street)	OFFICE USE ONLY 71					
City, State, Zip Code	(3) ID Number:					
(4) Check appropriate box(es): X Candidate (office sought): SHERIFF Political Committee Committee of Continuous Existence Party Executive Committee Electioneering Communication	CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED					
8/22/2008	IDENTIFIERS					
Cover Period: From / / / / To Special Electio	/ Report Type					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$0.00	Monetary Expenditures \$ 114.44					
Loans \$0.00	Transfers to Office Account \$ 0.00					
Total Monetary \$	Total Monetary \$ 114.44					
In-Kind \$	(O) Other Distributions					
	(8) Other Distributions \$0.00					
(9) TOTAL Monetary Contributions To Date \$ 7,944.25_	(10) TOTAL Monetary Expenditures To Date \$					
• •	CIFICATION					
It is a first degree misdemeanor for any per- I certify that I have examined this report and it is true, correct, and complete. (Type name) Individual complete Deputy Treasurer Deputy Treasurer electioneering commun.)	I certify that I have examined this report and it is true, correct, and complete. (Type name) Candidate Chairperson (only for PC, PTY & electioneering commun. organization)					
Signature	Signature					
DS-DE 12 (Rev. 08/04)						

(1) Name	CHRISTIAN MEISTER	GR (2) I.D. Number					71
	8/22/2008		9	/12/2008			
(3) Cover Peri	od//	thre	ough	1	(4) Pag	e1	of 0
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(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name					•	
(6)	(Last, Suffix, First, Middle)	_					
Sequence	Street Address &	l .	ontributor	Contribution	In-kind	Amendment	Amount
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	a unicatality	Amount
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1) Name CHRI	8/22/200	08		9/12	/2008	_ \	!) I.D. Numbe		
3) Cover Period		_/	through _			_ (4) Page1	of	1
(5) Date		(7)			(8)		(9)	(10)	(11)
(6) Sequence Number	St	reet Ad	ame First, Middle) dress & Zip Code		Purpo (add office s contributio candida	sought if on to a	Expenditure Type	Amendment	Amount
9/11/2008	twigonesto 2015 Corpora Boynton Beac				cards		МО		\$114.44
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FLORIDA DEPARTMENT OF CAMPAIGN TREASUR	STATE DIVISION OF ELECTIONS RER'S REPORT SUMMARY					
(1) CHRISTIAN MEISTER Name	OFFICE USE ONLY 71					
(2) P O BOX 60662, FORT MYERS, FL 33906 Address (number and street)						
City, State, Zip Gode						
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:					
(4) Check appropriate box(es): ☐ Candidate (office sought): SHERIFF ☐ Political Committee ☐ CHECK IF PC HAS DISBANDED ☐ Committee of Continuous Existence ☐ CHECK IF CCE HAS DISBANDED ☐ Party Executive Committee ☐ Electioneering Communication ☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED						
8/2/2008	RT IDENTIFIERS 5					
Cover Period: From// T	o/ / Report TypeF3					
☑ Original ☐ Amendment ☐ Special Elect	tion Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$0.00	Monetary Expenditures \$ 97.32					
Loans \$0.00	Transfers to Office Account \$ 0.00					
Total Monetary \$ 0.00	Total					
In-Kind \$	Monetary \$ 97.32					
	(8) Other Distributions \$0.00					
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$					
` '	RTIFICATION					
It is a first degree misdemeanor for any policy in the correct, and complete. (Type name) Continue Complete Continue Conti	correct, and complete. (Type name) CHRISTIAN MEIST E					
Signature	Signature					

DS-DE 12 (Rev. 08/04)

(1) Name CHR	CAMPAIGN TREASURER'S FISTIAN MEISTER 8/2/2008 8/		2) I.D. Number		71
(3) Cover Perio	d / / through	_//(4) Page <u>1</u>	of	1 .
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount
8/12/2008	Fort Myers Tinting Inc., 4125 Fowler Street, Unit 2 Fort Myers, FL 33901	label	МО		\$21.2
8/20/2008	Graphic Sign Solutions, 13626 N. Cleveland Ave. Fort Myers, FL 33903	signs	МО		\$76.0
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<u>(</u> 1) Name	CHRISTIAN MEISTER		(;	2) I.D. Numb	er	71
	8/2/2008		8/21/2008			
(3) Cover Perio	od / /	through	I = I	(4) Pa	ge ¹	of ⁰
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name				, ,	. ,
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation	n Type	Description	Amendment	Amount
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DS-DE 13 (Rev. 08/03	3) 5	EE REVERSE FOR	RINSTRUCTIONS	AND CODE VAL	.UES	

WAIVER OF REPORT (Section 106.07(7), F.S.)	OFFICE USE ONLY						
(PLEASE TYPE)							
CHRISTIAN MEISTER P O BOX 60662 FORT MYERS, FL 33906 Candidate's Name (Last, Suffix, First, Middle) OR Political Committee, CCE or Party Name	SHERIFF Identification Number (Assigned by Division of Elections)						
Address (Number and Street)	Office Sought (Include District, Circuit or Group Number)						
City State Zip Code							
Candidate Committee of Continuous Existence Political Committee Party Executive Committee	Check box if address has changed since last report. Check here if PC or CCE has DISBANDED and will no longer file reports.						
TYPE OF RI	TYPE OF REPORT						
(Check Approp							
QUARTERLY REPORTS PRIMARY ELECTION	GENERAL ELECTION						
☐ January ☐ 32nd day prior	☐ 46th day prior						
☐ April ☐ 18th day prior	☐ 32nd day prior						
☐ July ☐ 4th day prior	☐ 18th day prior ☐ TERMINATION REPORT						
☐ October	☐ 4th day prior ☐ SPECIAL ELECTION						
NOTIFICATION OF NO ACTIVITY IN CAMPAIGN A	CCOUNT FOR THE REPORTING REGION OF						
7/19/2008 through							
X							
Simulation	_ Jug. 4,2008						
Signature	✓ Date ^ℓ						
SIGNATURES REQUIRED FOR: Candidates Candidates Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Political Committees Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Committees of Continuous Existence Treasurer (s. 106.04(4)(c), F.S.) Party Executive Committees Treasurer or Chairman (s. 106.29(2), F.S.)							
In any reporting period when there has been no activity in the the required report is waived. However, the filing officer must that no report is being filed.	account (no funds expended or received) the filling of be notified in writing on the prescribed reporting date						

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) CHRISTIAN MEISTER Name	OFFICE USE ONLY 71					
(2) P O BOX 60662, FORT MYERS, FL 33906						
Address (number and street)	- /					
,						
City, State, Zip Code						
CHECK IF ADDRESS HAS CHANGED	(3) JD Number:					
(4) Check appropriate box(es):						
X Candidate (office sought): SHERIFF	V					
☐ Political Committee	CHECK IF PC HAS DISBANDED					
Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED					
Party Executive Committee						
Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED					
(5) REPORT	IDENTIFIERS					
Cover Period: From $\frac{4/1/2008}{7/18/2008}$ / Report Type F1						
☑ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$ 7,944.25	Monetary Expenditures \$ 7,620.63					
Loans \$	Transfers to Office Account \$ 0.00					
Total Monetary \$ 7,944.25	Total					
In-Kind \$	Monetary \$ 7,620.63					
•	(8) Other Distributions \$0.00					
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$					
(11) CERT	FICATION					
It is a first degree misdemeanor for any pers						
I certify that I have examined this report and it is true,	I certify that I have examined this report and it is true,					
correct, and complete.	correct, and complete. CHRISTIAN METSTER					
(Type name) KISTIAN MEISTER	(Type name)					
Individual (only for Treasurer Deputy Treasurer	Candidate Chairperson (only for PC, PTY & election earing commun. organization)					
electioneering.commun.)						
	X					
Signature	Signature					

(1) Name	RISTIAN M	MEISTER			· · · · · · · · · · · · · · · · · · ·	(2) I.D. Number		71	
	4/1/20	80		7/18/	2008				_
(3) Cover Period	1_	/	through	1	/	(4) Page	1	_ of	2

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
5/2/2008 / /	Meister, Christian PO BOX 60662 Fort Myers, FL 33906	I	candidate for sheriff<	СН	contribut ion by candidate		\$300.0
1							
5/8/2008	Meister, Christian PO BOX 60662 Fort Myers, FL 33906	Ι	candidate for sheriff<	СН	contribut ion by candidate		\$300.0
2						***************************************	
5/17/2008	Meister, Christian PO Box 60662 Fort Myers, FL 33906		candidate for sheriff	СН	contribut ion by candidate		\$1,000.00
3		******************************					
5/29/2008 / /	Matlacha Oyster House, 3930 Pine Island Road Matlacha, FL 33993	В	restaurant	: IK	facility rent		\$200.00
4							
6/4/2008 / /	Suntrust, 4770 Colonial Blvd Fort Myers, FL 33966	O	bank	СН	bank error correction of imprinted check		\$19.2!
6/11/2008	Meister, Christian PO Box 60662 Fort Myers, FL 33906		candidate for sheriff	СН	contribut ion by candidate		\$6,000.00
6							
6/16/2008	Statho, Dennis 3016 Tall Pine Circle Fort Myers, FL 33907		store manager	CA			\$5.00
7							
7/2/2008 / /	Meister, Christian PO Box 60662 Fort Myers, FL 33906		candidate for sheriff<	СН	contribut ion by candidate		\$300.06
8							

(1) Name	CHRISTIAN MEISTER	(2) I.D. Number						
4/1/2008			7/18/2008					
(3) Cover Per	iod///	through	11	(4) Page	2 of 2	_		
(5) Date	(7) Full Name	(8)	(9)	(10)	(11) (12)			
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation		In-kind Description	Amendment Amount			
7/11/2008 / /	Bronson, Will 2805 E. 5th Street Lehigh Acres, FL 33972	I	CA		\$20	.00		
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DS-DE 13 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name CHRIS	TIAN MEISTER		(2) I.D. Number	ILLO	71	
	4/1/2008	7/18/2008				
(3) Cover Period	//	through //_	(4) Page 1	of	3	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
1	OfficeMax, 9370 Ben C Pratt Six Mile Cypress Pa Fort Myers, FL 33966	business camps,ste. # 3 stamp	МО		\$62.52
5/12/2008	Graphic Sign Solutions, 13626 North Cleveland Ave. North Fort Myers, FL 33903	magnetic sign	МО		\$62.54
5/12/2008	Office Depot, 13550 Cleveland Ave. N. Fort Myers, FL 33903	notebook	МО		\$15.89
5/13/2008	Godaddy.com, 14455 N. Hayden Rd. Ste. 219 Scottsdale, AZ 85260	web-site	МО		\$118.14
5/15/2008	Suntrust, 4770 Colonial Blvd Fort Myers, FL 33966	imprinted check	MO		\$24.25
5/15/2008	Suntrust, 4770 Colonial Blvd Fort Myers, FL 33966	imprinted check	МО		\$19.25
7	Applestitch, 413 NE Van Loon Lane # 103 Cape Coral, FL 33909	t-shirt	МО		\$234.00
5/31/2008		video service	МО		\$150.00
DS-DF 14 (Rev	00/00				

(1) Name	CHRISTI	AN MEI	STER				 (2) I.D. Nun	nber		71	
	4	1/1/200)8		7/18/2	800		-			
(3) Cover F	eriod	/	/	through _	/_	/	 (4) Page	2	of	3	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
6/5/2008 9	PR Newswire, 810 7th Ave., 32nd floor New York, NY 10019	news service	МО		\$240.00
6/13/2008	Lee County Elections Office, PO Box 2545 Fort Myers, FL 33902	filing fee	МО		\$5,953.00
6/20/2008	Graphic Sign Solutions, 13626 North Cleveland Ave. North Fort Myers,, F 33903	sign	МО		\$69.75
6/22/2008	Godaddy.com, 14455 N. Hayden Rd. Ste. 219 Scottsdale,, AZ 85260	enhanceme website nt	МО		\$29.99
6/23/2008	Trophy Case, 11188 Cleveland Ave. Fort Myers, FL 339077	name tag	МО		\$13.67
6/27/2008	Graphic Sign Solutions, 13626 N. Cleveland Ave. N. Fort Myers, FL 33903	sign	МО		\$54.04
6/29/2008	Americas & Americas, 13414 SW 128th Street Miami, FL 33186	flags	МО		\$55.40
7/2/2008	Office Max, 9370 Ben C Pratt Six Mile Cypress Pa Fort Myers, FL 33966	business clawds Ste. # 3	МО		\$63.59

(1) Name_	CHRISTIAN MEIS	STER			(2) I.D	. Number		71	
	4/1/200	8	7/18/2	2008					
(3) Cover	Period/	/ thro	ugh/_	/	(4) Pa	ge 3_	of	3	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
7/2/2008	Walmart, 4770 Colonial Blvd Fort Myers, FL 33912	candy	МО		\$26.50
7/4/2008	FM Beach Civic Association, PO Box 2356 Fort Myers Beach, FL 33932	parade	МО		\$20.00
7/8/2008	Applestitch, 413 NE Van Loon Lane # 103 Cape Coral, FL 33909	t-shirt	МО		\$408.10
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