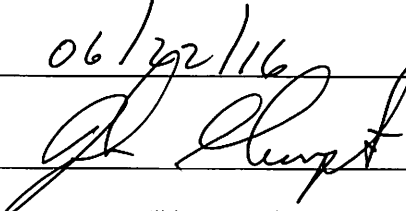


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

☒ ORIGINAL

☐ REVISED

Candidate Name	JOHN (JOHNNY G.) GUAQUINTO		
Residence Address	2022 SE 6 TH LN		
City and Zip Code	CAPE CORAL 33990		
Mailing Address Provide Mailing Address	<input type="checkbox"/> Check if same as above.	<input checked="" type="checkbox"/> Check if different from residence.	
	P.O. Box 151172		
	CAPE CORAL, FL 33915		
Telephone Number(s)	<input checked="" type="checkbox"/> Daytime (list below)	OR	<input type="checkbox"/> Alternate (list below)
	239-634-0131		
Email Address	JOHNNY.GUAQUINTO@GMAIL.COM SENSEI@SENSEIANDFREEDOMEMAIL.COM		
Office Sought	TAX COLLECTOR		
Area, District, Group or Seat #			
<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)	REPUBLICAN		
Date Of Birth or Voter Registration ID #	111596300		
Date	06/22/16		
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.

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

I, JOHN GUAQUINTO,

candidate for the office of TAX COLLECTOR;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X

[Signature]
Signature of Candidate

06/22/16
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 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)

John (Johnny G.) Giacquinto

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

P.O. Box 151172
Cape Coral, FL 33915

4. Telephone

(239) 634-0131

5. E-mail address

sonsoflibertyandfreedom@gmail.com

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

Tax Collector

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 ☒ Republican 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 Giacquinto

11. Mailing Address

P.O. Box 151172

12. Telephone

(239) 634-0131

13. City

Cape Coral

14. County

LEE

15. State

FL

16. Zip Code

33915

17. E-mail address

sonsoflibertyandfreedom@gmail.com

18. I have designated the following bank as my

☒ Primary Depository

☐ Secondary Depository

19. Name of Bank

Iberia Bank

20. Address

812 Del Prado Blvd

21. City

CAPE CORAL

22. County

LEE

23. State

FL

24. Zip Code

33990

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

06/23/16

26. Signature of Candidate

X [Signature]

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

I, John (Johnny G.) Giacquinto, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☐ Campaign Treasurer

☒ Deputy Treasurer.

6-23-16

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

16 JUN 23 PM 12:55 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)

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

John (Johnny G.) Ciaquinto

PO Box 151172

4. Telephone

5. E-mail address

(239) 614-0131

Sons of Liberty and Freedom @ EmbargoMail.com

Cape Coral, FL 33915

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

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

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

Tax Collector

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 ☒ Republican Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Peter Cacciola

11. Mailing Address

12. Telephone

P.O. Box 151172

(239) 464 3331

13. City

14. County

15. State

16. Zip Code

17. E-mail address

Cape Coral

LEE

FL

33915

PCACCIOLA@CRUISESINC.COM

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

19. Name of Bank

20. Address

IBERIA BANK

812 Del Prado Blvd

21. City

22. County

23. State

24. Zip Code

Cape Coral

LEE

FL

33990

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

06/22/16

X [Signature]

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

I, Peter Cacciola, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer

☐ Deputy Treasurer

6/21/16

X

[Signature]

Date

Signature of Campaign Treasurer or Deputy Treasurer