

CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL	REVISED			
Candidate Name	James R Adams			
Residence Address	James R Adams 1700 MONTOE St			
City and Zip Code	FL MILEN , F1 33901			
Mailing Address	Check if same as above.			
	PO BOX 1412			
	Ft Myen, Fl 33902			
Telephone Number(s)	Daytime (list below) OR OR			
Campaign Email Address				
Campaign Website	NIA			
Office Sought	Cornty Judge			
Area, District, Group or Seat #	4 乙			
→ 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	Lee County Court Judge army Z			
Date of Birth or Voter Registration ID #	October 23, 1955			
Date				
Candidate Signature	March 22, 2018 Janus Malam			

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website www.lee.vote/campaigns/candidate-packets/ and http://www.lee.vote/campaigns/candidate-packets/ and http://www.lee.vote/campaigns/candidate-finance-reports/. 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.

*18MAR22PM0453 SOE Lee Co F1

OFFICE USE ONLY

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

I, James 7 Adams,				
candidate for the office of Lee Conh Court Ju	dge -Grup 2;			
have been provided access to read and understand the requirements of				
Chapter 106, Florida Statutes.				
X Janus Hodanis	Morch 22,2018			
/ 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).

*18MAR22PM045350ELee Co F1

OFFICE USE ONLY

STATEMENT OF CANDIDATE FOR JUDICIAL OFFICE

(Section 105.031(5), F.S.) (Please Type)

1, James R Adams				
a judicial candidate, have received, read, and understand the requirements				
of the Florida Code of Judicial Conduct.				
James Malane				
(Signature of candidate)				
North 22, 2018				
(Date)				

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation

of Campaign Depository.

18MAR22PM0453 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				
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip				
James R Adams	code) POBOK 1412				
4. Telephone 5. E-mail address	Fl Myln F1 33902				
	I forder.				
σ. Oπice sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if				
Lee Comp Judge Gmp 2	applicable:				
Dee cong Duage Grigi E	My intent is to run as a Write-In candidate.				
8. If a candidate for a <u>partisan</u> 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				
10. Name of Treasurer or Deputy Treasurer ノロいたシア みはa MJ	1				
11. Mailing Address	12. Telephone				
PO BOX 1412					
	State 16. Zip Code 17. E-mail address				
Ft Myen LEG F	33902				
18. I have designated the following bank as my	Primary Depository Secondary Depository				
19. Name of Bank TBERIA BANK 21. City FL MY(1) 22. County LEE	20. Address 2247 Fint Strut				
21. City 22. County	23. State 24. Zip Code				
the Myer) LEE	F1 339y				
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				
March 22,2018	X Janus Asdum				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)					
I, James R Adam (Please Print or Type Name)	, do hereby accept the appointment				
(Please Print or Type Name)					
designated above as: Campaign Treasu	rer Deputy Treasurer.				
Marin 27, 2018 X	Canus Bodami				
Date	Signature of Campaign Treasurer or Deputy Treasurer				

*18MAR22PM0453 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)

officer before opening the campaign account.	OFFICE USE ONLY					
1. CHECK APPROPRIATE BOX(ES):						
3-C	Treasurer/Deputy Depository Office Party					
2. Name of Candidate (in this order: First, Middle, Last)	Address (include post office box or street, city, state, zip code)					
James R Adams	POBOX 1412					
4. Telephone 5. E-mail address						
	Ft Myen, F133902					
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if applicable:					
Lee County Court Judge -Group 2	My intent is to run as a Write-In candidate.					
8. If a candidate for a <u>partisan</u> office, check block and f	ill 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						
Jay Brett	1					
11. Mailing Address	12. Telephone					
9100 College Pointe Ct	(239) 334 1141					
9100 College Pointe Ct 13. City 14. County 15. S Ft Miles. LEG F	, , , , , , , , , , , , , , , , , , , ,					
18. I have designated the following bank as my	Primary Depository Secondary Depository					
19. Name of Bank	20. Address					
IBERIA BANK	2247 First St					
21. City 22. County	23. State 24. Zip Code					
Ft Myers LEG	F1 33901					
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					
March 22, 2018	X Janus Malaur					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)						
I, Jay & Breff , do hereby accept the appointment						
(Please Print or Type Name)						
designated above as: Campaign Treasurer Deputy Treasurer.						
March 2Z 2618 Signature of Campaign Treasurer or Deputy Treasurer						
Date	Signature of Campaign Treasurer or Deputy Treasurer					

*18MAR22PM0452 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.		rying	OFFICE USE ONLY	
1. CHECK APPROPRIATE B				
Initial Filing of Form	Re-filing to Change:		asurer/Deputy Depository Office Party	
2. Name of Candidate (in this		st)	3. Address (include post office box or street, city, state, zip code)	
	elans		DA BOX1412	
4. Telephone 5.	. E-mail address		POBOX1412 F1 MYENS, F1339UZ	
			pr myers (1 3 - 1	
6. Office sought (include dist	rict, circuit, group numbe	er)	7. If a candidate for a <u>nonpartisan</u> office, check if	
Well County Court.	Judge - Group	2	applicable: My intent is to run as a Write-In candidate.	
8. If a candidate for a partisa	<u>an</u> office, check block a	and fill in	n name of party as applicable: My intent is to run as a	
Write-In No Pa	rty Affiliation		Party candidate.	
9. I have appointed the follo	wing person to act as	my 🗀	Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer Michelle N Goble				
11. Mailing Address			12. Telephone	
9100 College i	Pointe Ct		(239) 334 -114/	
13. City		15. State		
Ft Myers	LEE	FI	33919 mgoble@Sbshlan,com	
18. I have designated the fo	llowing bank as my		Primary Depository Secondary Depository	
19. Name of Bank IBERIA BANI	L		2247 Ryst Street	
21. City	22. County	•	23. State 24. Zip Code	
Ft Myers	LEE		F1 33401	
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	26. Signature of Candidate	
March 22, 3	2018	X	X Jame Maland	
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)				
1. Michelle	(Please Print or Type Na	ame)	, do hereby accept the appointment	
designated above as:	Campaign Tro	easurer	Deputy Treasurer.	
Hotelliam X miller 1816618				
Date		Sig	ignature of Campaign Treasurer or Deputy Treasurer	