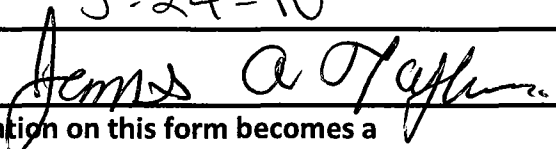


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL REVISED
(PLEASE CHECK ONE)

Candidate Name	James A. Taylor		
Residence Address	17980 Leetana Rd		
City and Zip Code	N. Fort Myers, 33917		
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239 707 4628	OR	
Email Address	ktaylor5@comcast.net		
Office Sought	Lee County Commissioner		
Area, District, Group Or Seat Number	4		
Political Party (if applicable for office sought)	Republican		
Date Of Birth Or Voter ID #	04-26-55		
Date	3-24-10		
Candidate Signature	X 		

All information on this form becomes a
public record upon receipt by the Lee County Supervisor of Elections.

Under Florida Law, email addresses are public records; if you do not want your personal email address released, you may wish to create a "campaign-specific" email address. An email address will allow the Lee County Supervisor of Elections Office to provide a candidate with expedited written-communications and notices in addition to mailed written-communications and notifications.

1

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

James A. Taylor "JT"

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

17980 Leetana Rd
N. Fort Myers, FL 33917

4. Telephone (optional)

(239) 707-4628

5. E-mail address (optional)

JTaylor5@comcast.net

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

COMMISSIONER
Lee County District 4

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

Roger Good

11. Mailing Address (If post office box or drawer, also include street address)

17960 LEETANA RD

12. Telephone

(239) 567-1884

13. City N. Ft Myers 14. County LEE 15. State FL 16. Zip Code 33917 17. E-mail address (optional) goodspage@embargmail.com

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

19. Name of Bank

Suntrust Bank J.T.

20. Street Address

4415 Metro Pky

21. City

Fort Myers

22. County

Lee

23. State

FL

24. Zip Code

33916

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

3/29/2010

26. Signature of Candidate

X James A Taylor

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

I, ROGER GOOD, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3/28/10
Date

X Roger Good
Signature of Campaign Treasurer or Deputy Treasurer

**STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

8

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

"J.T." James Taylor

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

17980 LEETANA RD

4. Telephone (optional)

(239) 707-4628

5. E-mail address (optional)

KTaylor5@Comcast.net + N FT MYERS, FL 33917

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

LEE COUNTY COMMISSIONER DISTRICT 4

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

11. Mailing Address (If post office box or drawer, also include street address)

17980 LEETANA RD

12. Telephone

(239) 707-4628

13. City

N. FT MYERS

14. County

LEE

15. State

FL

16. Zip Code

33917

17. E-mail address (optional)

KTaylor5@comcast.net

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

19. Name of Bank SUNTRUST BANK

20. Street Address 4415 METRO PKY

21. City

FORT MYERS

22. County

LEE

23. State

FL

24. Zip Code

33916

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

3/29/10

26. Signature of Candidate

X James A Taylor

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

I, "J.T." James Taylor, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3/29/10
Date

X James A Taylor
Signature of Campaign Treasurer or Deputy Treasurer

OFFICE USE ONLY

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

I, James A Taylor "JT",
candidate for the office of Lee County Commissioner District 4;
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X

James A Taylor J.T.
Signature of Candidate

3/25/10

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).

AFFIDAVIT OF UNDUE BURDEN

Section 99.097(4), Florida Statutes

I certify under oath that I intend to qualify as a candidate for the office of Lee County Commissioners District 4 and that I am unable to pay the fee for verification of petition signatures for that office without imposing an undue burden on my personal resources or on resources otherwise available to me.

Under penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true.

James A. Taylor "JT"
Print name of candidate

James A Taylor J-T.
Signature of candidate

17980 Leetana Rd
Residence address (do not use post office box)

Fort Myers FL 33917
City State Zip Code

239, 707-4628
Day Phone

239, 332-5467
Fax Number

10MAR29PM0457 SDE Lee Co FL