CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL		REVISED		
Candidate Name	Jos Michael	McLAid		
Residence Address	19359 LA SERAN	APR		
City and Zip Code	Check if same as above. Check if different from residence.			
	Check if same as above.	Check if different from residence.		
Mailing Address				
Telephone Number(s)	Daytime (list below)	OR Alternate (list below)		
	239-322-7142	OK _		
Campaign Email Address	VoTe4 JONMELAIN @ GMAIL. COM			
Campaign Website	N/A			
Office Sought	Dist 3 Council Member			
Area, District, Group or Seat #				
→ 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	NON			
Incumbent	ĭ¥Yes	□No		
Date of Birth or Voter Registration ID #	05/05/44			
Candidate Signature & Date mm m Lam 3/24/22				

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website www.lee.vote or visit the following link: https://www.lee.vote/Candidate-Online-Packets. Under Florida Law, a candidate's campaign-contact information, such as address, telephone number, and email address are available to the public. If you have questions or need more information about becoming a candidate for public office, please call (239) LEE-VOTE (239-533-8683) and ask for the Qualifying Department.

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.

officer before opening the campaign account.	OFFICE USE ONLY			
1. CHECK APPROPRIATE BOX(ES):				
	reasurer/Deputy Depository Office Party			
2. Name of Candidate (in this order: First, Middle, Last) MICHAE 4. Telephone 5. E-mail address (239)322-7142 5. Middle, Last)	3. Address (include post office box or street, city, state, zip code) 19359 LASCRENA DR.			
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if			
o. Othor bought (molade district, should, group hamber)	applicable:			
Dist 3 Village of Estero Cource) membre My intent is to run as a Write-In candidate.				
8. If a candidate for a partisan office, check block and fill	I 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				
Son Michael McLaid	,			
11. Mailing Address	12. Telephone			
19359 LaSiReNA De	1239 1322-714/2			
13. City 14. County 15. State 16. Zip Code 17. E-mail address FL 33767 SMdainssi CGMail.com				
18. I have designated the following bank as my				
19. Name of Bank	20. Address			
wells targo	8700 CORKSCRUW RD			
21. City 22. County	23. State 24. Zip Code			
ts), as Lei	FL 3396'			
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			
3/241/2022 X / m 202				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)				
I, Jon Michael McLie , do hereby accept the appointment (Please Print or Type Name)				
designated above as: Campaign Treasurer Deputy Treasurer.				
3/24/2020 (X) m/				
Date 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)

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 Party 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) code) 19359 LASERENA DR. EsTero, FL. 33967 (239)322-7142 JMCLAISSI @ Gnales 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: DST 3 Village OF EITCRD, COUNCIDENTER 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, DAMAG 11. Mailing Address 12. Telephone

21. City 22. County 23. State 24. Zip Code Eslerd 33928 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.

15. State

25. Date 26. Signature of Candidate

8509

19. Name of Bank

٥٥

13. City

16. Zip Code

33967

Primary Depository

27.

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

WAYNE J. SMITH (Please Print or Type Name)

14. County

18. I have designated the following bank as my

, do hereby accept the appointment

(571) 239-9

Secondary Depository

17. E-mail address

20. Address 8.700 CORKSCRCW RD

designated above as:

Campaign Treasurer

Deputy Treasurer.

Signature of Campaign Treasurer or Deputy Treasurer

1226 FEY CHOSE OF 1

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

١,	JON	MichAel	McLAin	
5.0				

candidate for the office of VIII. AGC OF Estero, Dist 3 Council member

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

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).