LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

V ORIGINAL REVISED (PLEASE CHECK ONE)		
Candidate Name	Paul W Schafer	
Residence Address	7914 Go Canes Way	
City and Zip Code	FORT MYERS 33966	
Mailing Address (if different)	Check if same as above.	
Telephone Number(s) (Daytime)	239-218-6123 OR 239-218-6123 239-218-6113	
Email Address	pschafer 1 CcomeasTinet	
Office Sought	hee County School Bourd	
Area, District, Group Or Seat Number	DISTRICT 2	
Political Party (if applicable for office sought)		
Date Of Birth Or Voter ID #	Dec 27, 1939	
Date May 31 2011		
Candidate Signature	X Faul M Sekale	

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.

STATEMENT OF CANDIDATE	OFFICE USE ONLY
(Section 106.023, F.S.) (Please Type)	
(Tiease Type)	
1, Paul W. Schart	р вГ,
candidate for the office of Lee Count	Ty School Board DISTRICT 2;
have received, read and understand th	e requirements of Chapter 106,
Florida Statutes.	
X Taul Signature of Candidate	<u>May 31, 2011</u> Date
Each candidate must file a statement with the Appointment of Campaign Treasurer and Design failure to file this form is a first degree misder Financing Act which may result in a fine of up the Statutes).	nation of Campaign Depository is filed. Willful meanor and a civil violation of the Campaign

11MAY31PM0421 SDE Lee Co F1

DS-DE 84 (Rev. 08/03)

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	OFFICE USE ONLY		
(PLEASE PRINT OR TYPE)	ar Bund		
	السا ج:		
1. CHECK APPROPRIATE BOX:			
2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip			
Paul Walter Schafer Gold Gones Way 4. Telephone (optional) 5. E-mail address (optional) Fort Myers, FL 33966			
(239)218-6123 psepafer 10 comeastinet			
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if		
Lee County School Board Dist. 2 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 AffiliationParty candidate.			
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer			
10. Name of Treasurer or Deputy Treasurer			
Faul Walter Schater 11. Mailing Address (If post office box or drawer, also include street address) 12. Telephone			
	e street address) 12. Telephone $(739)718-617.3$		
<u>7914 Go Counes Way</u> 13. City 14. County 15. St			
FORT MYERS LEE FA			
18. I have designated the following bank as my	Primary Depository Secondary Depository		
19. Name of Bank 20. Street Address			
Edison NorTional Bank	2105 FIRST ST.		
21. City 22. County	23. State 24. Zip Code 3340/		
FOR MARS ARE	110		
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		
May 31, 2011	X Faul II Mehoof		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)			
I, <u>Paul W. Schwfer</u> , , do hereby accept the appointment (Please Print or Type Name)			
designated above as: X Campaign Treasurer Deputy Treasurer.			
May 31, 2011 X Fauld Schafer Date Signature of Campaign Treasurer or Deputy Treasurer			

DS-DE 9 (Rev. 11/09)