


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

 ORIGINAL

 REVISED

(PLEASE CHECK ONE)

Candidate Name	James P. Chandler		
Residence Address	1124 NE 33rd St		
City and Zip Code	Cape Coral 33909		
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	573-2656	OR	
Email Address	dylansgrandpa@embarqmail.com		
Office Sought	Tax Collector		
Area, District, Group Or Seat Number			
Political Party (if applicable for office sought)	NPA		
Date Of Birth Or Voter ID #	8/26/57		
Date	4/13/12		
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.

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

CHANDLER, JAMES PAUL
1124 NE 33RD ST
CAPE CORAL FL 33909

(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)

James P. Chandler

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

1124 NE 33rd St
Cape Coral FL 33909

4. Telephone

(239) 573 2056

5. E-mail address

dylansgrandpa@embarqmail.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 _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

James P. Chandler

11. Mailing Address

1124 NE 33rd St

12. Telephone

()

13. City

Cape Coral

14. County

Lee

15. State

FL

16. Zip Code

33909

17. E-mail address

dylansgrandpa@embarqmail.com

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

19. Name of Bank

Bank of America

20. Address

571 Pine Island Rd

21. City

Fort Myers

22. County

Lee

23. State

FL

24. Zip Code

33903

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

4/13/12

26. Signature of Candidate

X 

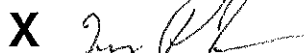
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, James P. Chandler, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/13/12

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

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


OFFICE USE ONLY

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CHANDLER, JAMES PAUL
1124 NE 33RD ST
CAPE CORAL FL 33909

I, James P. Chandler,
candidate for the office of Tax Collector;

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

X 
Signature of Candidate

4/13/12
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).

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