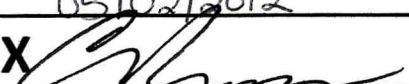


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

☒ ORIGINAL

☐ REVISED

(PLEASE CHECK ONE)

Candidate Name	Cecil L Pendergrass		
Residence Address	With held Per Fl. S.		
City and Zip Code			
Mailing Address (if different)	<input type="checkbox"/> Check if same as above. P.O. Box 1983 Ft Myers FL 33902		
Telephone Number(s) (Daytime)	(239) 994-7922	OR	
Email Address	cecil@vote.pendergrass.com		
Office Sought	Lee County Commission		
Area, District, Group Or Seat Number	District 2		
Political Party (if applicable for office sought)	Republican		
Date Of Birth Or Voter ID #	03/26/1963		
Date	05/02/2012		
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 notification

PENDERGRASS, CECIL L
P O BOX 1983
FORT MYERS FL 33902

111499773

12 MAY 2 PM 12:40 SDE LEE CO FL

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 ☐ Office ☐ Party

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

Cecil L. Pendergrass

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

P. O. Box 1983 Fort Myers, Florida 33902

4. Telephone

(239) 994-7922

5. E-mail address

cecil@votependergrass.com

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

Lee County Commission District 2

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

Jodi Pendergrass

11. Mailing Address

P. O. Box 1983

12. Telephone

(239) 994-7922

13. City

Fort Myers

14. County

Lee

15. State

Florida

16. Zip Code

33902

17. E-mail address

cecil@votependergrass.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

Edison Bank

20. Address

2105 First Street

21. City

Fort Myers

22. County

Lee

23. State

Florida

24. Zip Code

33902

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

May 2, 2012

26. Signature of Candidate

X 

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

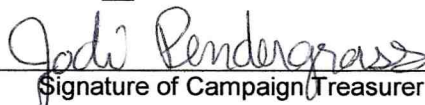
I, Jodi Pendergrass, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

May 2, 2012

Date

X


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 ☐ Office ☐ Party

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

Cecil L. Pendergrass

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

P.O. Box 1983
Fort Myers, FL 33902

4. Telephone

(239) 994-7922

5. E-mail address

cecil@votependergrass.com

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

Lee County Commission, District 2

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☐ 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

Cecil L. Pendergrass

11. Mailing Address

P.O. Box 1983

12. Telephone

(239) 994-7922

13. City

Fort Myers

14. County

Lee

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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

May 2, 2012

26. Signature of Candidate

X 

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

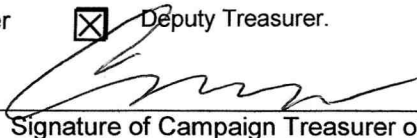
I, Cecil L. Pendergrass, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

May 2, 2012

Date

X


Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

I, Cecil L Pendergrass ,
candidate for the office of Lee County Commission District 2 ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

May 2, 2012
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).