

# REVISED


## LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL

REVISED

(PLEASE CHECK ONE)

09JUN19M1043 SDE Lee Co Fl

Candidate Name	Sonny Haas		
Residence Address	1403 W 17 <sup>th</sup> St		
City and Zip Code	Lehigh Acres 33972		
Mailing Address (if different)	<input type="checkbox"/> Check if same as above. Box 60603 Ft Myers FL 33906		
Telephone Number(s) (Daytime)	239 707-0516	OR	
Email Address	sonny.haas@yahoo.com		
Office Sought	Lee County Commissioner		
Area, District, Group Or Seat Number	District 2		
Political Party (if applicable for office sought)	Republican		
Date Of Birth Or Voter ID #	14 Nov 64		
Date	11 Jun 09		
Candidate Signature	<input checked="" type="checkbox"/> 		

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.

# SCANNED

# OBSOLETE

## LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL       REVISED  
(PLEASE CHECK ONE)

Candidate Name	Sonny Haas	
Residence Address	1403 W. 17 <sup>th</sup> St	
City and Zip Code	Lehigh Acres 33972	
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above. Box 6666 Alva, FL 33920	
Telephone Number(s) (Daytime)	339767-0516	OR
Email Address	sonny.haas@yahoo.com	
Office Sought	Lee County Commissioner	
Area, District, Group Or Seat Number	District 2	
Political Party (if applicable for office sought)	Republican	
Date Of Birth Or Voter ID #	14 Nov 64	
Date	20 May 09	
Candidate Signature	<input checked="" type="checkbox"/> <i>Sonny Haas</i>	

FORM 21 (REV. 11/51) SDE Lee Co FL

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.

# SCANNED

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

(PLEASE TYPE)

OFFICE USE ONLY

'09MAY21AM1152 SOE L ee Co FI

CHECK APPROPRIATE BOX:

Original Appointment       Deputy Treasurer       Reappointment of Treasurer

Name of Candidate  
Sonny Haas

1. Address (include post office box or street, city, state, zip code)  
1403 W 17th St, Lehigh Acres, FL 33972

Telephone (optional)  
( 239 ) 707-0516

2. Party (Partisan candidates only)  
Republican

3. Office (add district, circuit, group number)  
District 2, County Commissioner

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

4. Name of Treasurer or Deputy Treasurer  
Sonny Haas

5. Mailing Address (If post office box or drawer add street address)  
Box 666

6. Telephone  
239 707-0516

7. City  
Alva

8. County  
Lee

9. State  
Florida

10. Zip Code  
33920

I have designated the following named bank as my  Primary Depository       Secondary Depository

11. Name of Bank  
Sun Trust


12. Street Address

13. City  
Ft Myers

14. County  
Lee

15. State  
Florida

16. Zip Code

17. Signature of Candidate  
 

Date  
20 May 09

**Campaign Treasurer's Acceptance of Appointment**

I, Sonny Haas, do hereby accept the appointment as  
(Please Print or Type)

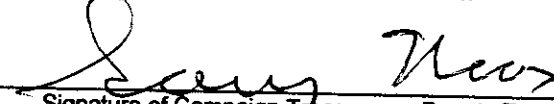
Campaign Treasurer       Deputy Treasurer      for the campaign of Sonny Haas

who is seeking nomination or election as a Republican candidate to the office of  
(Party)

County Commissioner, District 2

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

20 May 09  
Date

  
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 TYPE)

OFFICE USE ONLY

CHECK APPROPRIATE BOX:

Original Appointment       Deputy Treasurer       Reappointment of Treasurer

Name of Candidate: **Sonny Haas**  
1. Address (include post office box or street, city, state, zip code):  
**Box 666 Alva FL 33920**

Telephone (optional): ( 239 ) 707-0516  
2. Party (Partisan candidates only): **Republican**  
3. Office (add district, circuit, group number): **County Commissioner, District 2**

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

4. Name of Treasurer or Deputy Treasurer:  
**Kathy Burgess**

5. Mailing Address (If post office box or drawer add street address):  
**Box 666**  
6. Telephone:  
**239 770-2820**

7. City: **Alva**      8. County: **Lee**      9. State: **Florida**      10. Zip Code: **33920**

I have designated the following named bank as my  Primary Depository       Secondary Depository

11. Name of Bank: **Sun Trust**  
12. Street Address:

13. City: **Ft Myers**      14. County: **Lee**      15. State: **Florida**      16. Zip Code:

17. Signature of Candidate: **X**       Date: **06/04/09**

**Campaign Treasurer's Acceptance of Appointment**

I, **Kathy Burgess**, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer       Deputy Treasurer      for the campaign of **Sonny Haas**

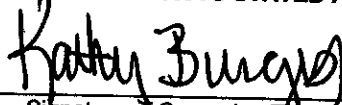
who is seeking nomination or election as a **Republican** candidate to the office of  
(Party)

**County Commissioner, District 2**

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

4 Jun 09

Date

**X**   
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.)

OFFICE USE ONLY

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment       Deputy Treasurer       Reappointment of Treasurer

Name of Candidate: **Sonny Haas**  
1. Address (include post office box or street, city, state, zip code):  
**Box 666 Alva FL 33920**

Telephone (optional): **( 239 ) 707-0516**  
2. Party (Partisan candidates only): **Republican**  
3. Office (add district, circuit, group number): **County Commissioner District 2**

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

4. Name of Treasurer or Deputy Treasurer:  
**Sonny Haas**

5. Mailing Address (If post office box or drawer add street address):  
**Box 666**  
6. Telephone:  
**239 707-0516**

7. City: **Alva**      8. County: **Lee**      9. State: **FL**      10. Zip Code: **33920**

I have designated the following named bank as my  Primary Depository  Secondary Depository

11. Name of Bank: **SunTrust**  
12. Street Address:

13. City: **N. Ft Myers**      14. County: **Lee**      15. State: **FL**      16. Zip Code:

17. Signature of Candidate:       Date: **8 Jun 09**

**Campaign Treasurer's Acceptance of Appointment**


I, **Sonny Haas**, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer  Deputy Treasurer for the campaign of **Sonny Haas**

who is seeking nomination or election as a **Republican** candidate to the office of  
(Party)

**County Commissioner District 2**

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

**8 Jun 09**        
Date      Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

\*09MAY21AM1152 SOE Lee Co FL

I, Sonny Haas,  
candidate for the office of District 2, Lee County Commissioner;

have received, read and understand the requirements of Chapter 106,  
Florida Statutes.

X   
Signature of Candidate

20 May 09  
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).