


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

 ORIGINAL

 REVISED

(PLEASE CHECK ONE)

*09NDV17PH0401 SDE Lee Co FL

Candidate Name	COLE PEACOCK		
Residence Address	1549 REYNARD DR		
City and Zip Code	FT. MYERS, FL 33919		
Mailing Address (if different)	<input type="checkbox"/> Check if same as above. P.O. Box 9387, Ft. MYERS, FL 33902		
Telephone Number(s) (Daytime)	239-462-5805	OR	
Email Address	COLEFOR.COMMISSIONER@COMCAST.NET		
Office Sought	LEE COUNTY COMMISSION		
Area, District, Group Or Seat Number	DISTRICT 2		
Political Party (if applicable for office sought)	DEMOCRAT		
Date Of Birth Or Voter ID #	8/31/73		
Date	11/17/09		
Candidate Signature	X 		

REVISED

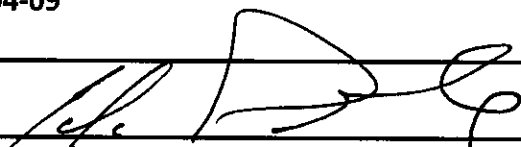
All information on this form becomes a
public record upon receipt by the Lee County Supervisor of Elections.

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.

OBSOLETE

LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL REVISED
 (PLEASE CHECK ONE)

Candidate Name	COLE PEACOCK		
Residence Address	1549 REYNARD DR		
City and Zip Code	FORT MYERS FL 33919		
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239-462-5805	OR	
Email Address	T/B/A <i>coleforscommissioner@comcast.net</i>		
Office Sought	LEE COUNTY COMMISSION		
Area, District, Group Or Seat Number	DISTRICT 2		
Political Party (if applicable for office sought)	DEMOCRAT		
Date Of Birth Or Voter ID #	111579790		
Date	11-04-09		
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.

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

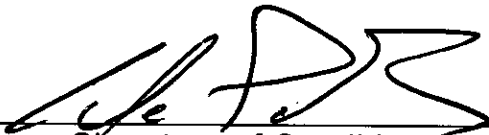
OFFICE USE ONLY

I, COLE PEACOCK Due 11-16-09,

candidate for the office of LEE COUNTY COMMISSION DISTRICT 2;

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

X



Signature of Candidate

11/5/09

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).

OFFICE USE ONLY

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

REVISED

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer

Name of Candidate: COLE PEACOCK
1. Address (include post office box or street, city, state, zip code): 1549 HEYWARD DR. FT. MYERS, FL 33909

Telephone (optional): (239) 462-5805
2. Party (Partisan candidates only): DEMOCRAT
3. Office (add district, circuit, group number): LEE Co Commission District 2

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

4. Name of Treasurer or Deputy Treasurer: WILLIAM B. WILTSHIRE

5. Mailing Address (If post office box or drawer add street address): P.O. BOX 1020
6. Telephone: (239) 334-9191

7. City: FT. MYERS 8. County: LEE 9. State: FLORIDA 10. Zip Code: 33902

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

11. Name of Bank: SOUTHWEST CAPITAL BANK
12. Street Address: 12670 CREEKSIDE LN. SK 101

13. City: FORT MYERS 14. County: LEE 15. State: FL 16. Zip Code: 33919

17. Signature of Candidate: X  Date: 11/4/09

Campaign Treasurer's Acceptance of Appointment

I, WILLIAM WILTSHIRE, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of COLE PEACOCK

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

LEE COUNTY COMMISSION 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.

11/4/09
Date

X William B. Wiltshire
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

REVISED

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer

Name of Candidate: LOLE PEACOCK 1. Address (include post office box or street, city, state, zip code): 1349 REYNARD DR, FT. MYERS FL 33919

Telephone (optional): (239) 462-5805 2. Party (Partisan candidates only): DEMOCRAT 3. Office (add district, circuit, group number): LEE CO COMMISSION DISTRICT 2

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

4. Name of Treasurer or Deputy Treasurer: LOLE PEACOCK

5. Mailing Address (If post office box or drawer add street address): 1349 REYNARD DR 6. Telephone: 239-462-5805

7. City: FT MYERS 8. County: LEE 9. State: FL 10. Zip Code: 33919

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

11. Name of Bank: SOUTHWEST CAPITAL BANK 12. Street Address: 12670 CREEKSIDE LANE, SUITE 101

13. City: FT. MYERS 14. County: LEE 15. State: FL 16. Zip Code: 33919

17. Signature of Candidate: [Signature] Date: 11/4/09

Campaign Treasurer's Acceptance of Appointment

I, LOLE PEACOCK, do hereby accept the appointment as
 (Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of LOLE PEACOCK

who is seeking nomination or election as a DEMOCRATIC candidate to the office of

LEE CO COMMISSION 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.

11/4/09
Date

[Signature]
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

OBSOLETE

CHECK APPROPRIATE BOX:

Original Appointment

Deputy Treasurer

Reappointment of Treasurer

Name of Candidate

COLE PEACOCK

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

1549 REYNARD DR FORT MYERS FL 33919

Telephone (optional)

(239) 462-5805

2. Party (Partisan candidates only)

DEMOCRAT

3. Office (add district, circuit, group number)

LEE CO COMMISSION DISTRICT 2

I have appointed the following person to act as my

Campaign Treasurer

Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer

COLE PEACOCK

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

1549 REYNARD DR

6. Telephone

239-462-5805

7. City

FORT MYERS

8. County

LEE

9. State

FL

10. Zip Code

33919

I have designated the following named bank as my

Primary Depository

Secondary Depository

11. Name of Bank

SOUTHWEST CAPITAL BANK

12. Street Address

12670 Creekside Lane, Suite 101

13. City

FORT MYERS

14. County

LEE

15. State

FL

16. Zip Code

33919

17. Signature of Candidate

X

Date

11-04-09

Campaign Treasurer's Acceptance of Appointment

I, COLE PEACOCK, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer

Deputy Treasurer

for the campaign of COLE PEACOCK

who is seeking nomination or election as a

DEMOCRATIC

candidate to the office of

(Party)

LEE CO COMMISSION 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.

11-04-09

Date

X

Signature of Campaign Treasurer or Deputy Treasurer