LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	Debbie Jorclan
Residence Address	2111 BramanQue
City and Zip Code	Ft. Myers, 512 33901
Mailing Address (if different)	Check if same as above.
Telephone Number(s) (Daytime)	332-3301 OR 229-9825
Email Address	Djordan FM@yahoo.com
Office Sought	County Commissioner
Area, District, Group Or Seat Number	District 2
Political Party (If Applicable)	Democrat
Date Of Birth Or Voter ID #	111496275
Date	11/9/09
Candidate Signature	X D. Indan

All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.

Candidates who provide an email address <u>may be</u> contacted by this office, via the email address provided by the candidate, for campaign related communications that pertain exclusively to the candidate's campaign.

All other mailings from this office, which pertain to every candidate, will be via United States Postal Service.

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASUREI 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 Secondary Depository	Ä		
Name of Candidate	1. Address (include post office box or street, city, state, zip code)	NA NA		
Debbie Jordan	2111 Braman Que. Ft. Myers, Sla. 33901	109N0V09PN0140 SOE Lee Co FI		
Telephone (optional) 2. Party (Partisan candidates only) 3. Office (add district, circuit, group number)				
() Dem County Commissioner/10-2				
I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer				
4. Name of Treasurer or Deputy Treasurer				
5. Mailing Address (If post office box or drawer add street addre	Chris Lackey 5. Mailing Address (If post office box or drawer add street address) 6. Telephone			
2122 Grace Que	849-099			
7. City 8. County	9. State 10. Zip Code			
tort myers Lee	Fla 3390/			
I have designated the following named bank as my Primary Depository Secondary Depository				
11. Name of Bank BUNCOASE Fecleral 12. Street Address 1533 Molhews DE.				
13. City FORT MYEVS 14. County Lee	15. State 16. Zip Code $F(a)$ 33907			
17. Signature of Candidate	Date			
Campaign Treasurer's Acceptance of Appointment				
I, <u>Christopher Lackey</u> , do hereby accept the appointment as				
Campaign Treasurer Deputy Treasurer for the campaign of Debbie Jordan				
who is seeking nomination or election as a Democrat candidate to the office of				
County Commissioner() [2] (Party) Lee				
County, Florida, I am qualified to accept this appointment.				
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.				
X	A			
Date	Signature of Campaign Treasurer or Deputy Treasurer			

4

DS-DE 9 (Rev. 02/06)

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASUREF AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.)	OFFICE USE ONLY			
(PLEASE TYPE)				
CHECK APPROPRIATE BOX:				
	outy Treasurer Reappointment of Treasurer			
Name of Candidate 1. Address (include post office box or street, city, state, zip code) Debbie Jordan 2111 Branan Que.				
Telephone (optional) 2. Party (Partisan candidates only) 3. Office (add district, circuit, group number)				
()	2111 DTCMICUT CLOPE 91- MUELS, 917.33901 iy) 3. Office (add district, circuit, group number) COURTY Comm - 1 D - 2 npaign Treasurer			
I have appointed the following person to act as my Campaign Treasurer				
4. Name of Treasurer or Deputy Treasurer				
5. Mailing Address (If post office box or drawer add street address) 2111 Braman aue 239. 229-9825				
7. City A. Myers 8. County Lee	9. State Fla 10. Zip Code 33901			
I have designated the following named bank as my Primary Depository Secondary Depository				
11. Name of Bank 12. Street Address				
13. City 14. County 15. State 16. Zip County				
FORT Myers Lee Fla. 33907				
17. Signature of Candidate				
Campaign Treasurer's A	cceptance of Appointment			
Debbie Jordan do hereby accept the appointment of				
(Please Print or Type) Campaign Treasurer K Deputy Treasurer for the campaign of Debbic Sorclary				
who is seeking nomination or election as a De	MAC YOL candidate to the office of			
County Commissioner -D-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.				
1/9/09 × Droden				
Date Signature of Carlpaign Treasurer or Deputy Treasurer				

DS-DE 9 (Rev. 01/08)

OFFICE USE ONLY STATEMENT OF **CANDIDATE** (Section 106.023, F.S.) (Please Type) ebra Jordan I, candidate for the office of County Commissioner have received, read and understand the requirements of Chapter 106, Florida Statutes. Х Signature of Candidate 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).

AFFIDAVIT OF UNDUE BURDEN

Section 99.097(4), Florida Statutes

I certify under oath that I intend to qualify as a candidate for the office of $\underline{\text{Lee County Commission} - \text{District 7}}_{2}$ and that I am unable to pay the fee for verification of petition signatures for that office without imposing an undue burden on my personal resources or on resources otherwise available to me.

Under penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true.

Print name of candidate

Signature

Braman (U)l.

Residence address (do not use post office box)

State

Dav Phone

- 6044

Fax Number