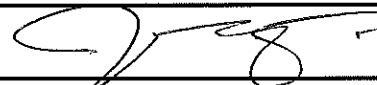


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

☒ ORIGINAL☐ REVISED

(Please Check One)

Candidate Name	JOSH MCGRAIL		
Residence Address	1704 NW 24 TH PLACE		
City and Zip Code	CAPE CORAL, 33993		
Mailing Address (If Different From Residence)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239-634-5898	OR	
Email Address	mcgrail4lee@gmail.com		
Office Sought	BOARD OF COUNTY COMMISSIONERS, D.4		
Area, District, Group Or Seat Number	DISTRICT 4		
Political Party (If Applicable—For Office Sought)	REPUBLICAN		
Date Of Birth Or Voter Registration ID #	7/7/1979		
Date	9/24/2013		
Candidate Signature	X 		

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All candidate-qualifying documents and campaign finance reports will be posted at the Lee County Supervisor of Elections website www.leeelections.com or use the following link: <http://leeelections.com/content.php?l=74>.

Under Florida Law, email addresses are public records; if you do not want your personal email address released to the public, you should create a "campaign-specific" email address. A campaign-specific email address will allow the Lee County Supervisor of Elections to provide a candidate and his/her campaign treasurer with expedited electronic communications and notices in addition to communications and notifications sent via standard USPS mail.

A campaign-specific email address may also provide voters the opportunity to learn more about you and your campaign platform by serving as an alternative method of contact.

STATEMENT OF CANDIDATE

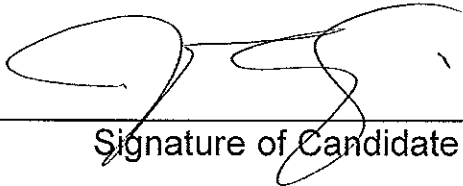
(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

I, JOSH MCGRAIL,
candidate for the office of LEE COUNTY BOARD OF COUNTY COMMISSIONERS, DISTRICT 4,
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X


Signature of Candidate

9/24/2013

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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*13SEP24PM 3 41 SOE 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)

JOSH MCGRAIL

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

1704 NW 24TH PL
CAPE CORAL, FL 33993

4. Telephone

(239) 634-5898

5. E-mail address

mcgrail4lee@gmail.com

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

LEE COUNTY B.O.C.C., DIST. 4

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

Kimberly A. McGrail

11. Mailing Address

126 SE 1st Ave

12. Telephone

(239) 458-1882

13. City

Cape Coral

14. County

Lee

15. State

FL

16. Zip Code

33990

17. E-mail address

mcgrail4lee@gmail.com

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

19. Name of Bank

Capital Bank

20. Address

521 Del Prado Blvd S

21. City

Cape Coral

22. County

Lee

23. State

FL

24. Zip Code

33990

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

9/24/2013

26. Signature of Candidate

X

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

I, Kimberly A. McGrail, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

9/24/2013
Date

X

Kimberly A. McGrail
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)

JOSH MCGRAIL

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

1704 NW 24TH PL
CAPE CORAL, FL 33993

4. Telephone

(239) 634-5898

5. E-mail address

mcgrail4lee@gmail.com

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

LEE COUNTY B.O.C.C., DIST. 4

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

JOSH MCGRAIL

11. Mailing Address

1704 NW 24TH PL

12. Telephone

(239) 634-5898

13. City

CAPE CORAL

14. County

LEE

15. State

FL

16. Zip Code

33993

17. E-mail address

mcgrail4lee@gmail.com

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

19. Name of Bank

CAPITAL BANK

20. Address

521 DEL PRADO BLVD S.

21. City

CAPE CORAL

22. County

LEE

23. State

FL

24. Zip Code

33990

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

9/24/2013

26. Signature of Candidate

X

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

I, JOSH MCGRAIL, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

☐

Campaign Treasurer

☒

Deputy Treasurer

9/24/2013

Date

X

Signature of Campaign Treasurer or Deputy Treasurer