

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

Supporting or opposing any candidate, issue, or political party  
and which accepts contributions or makes expenditures  
during a calendar year in an aggregate amount in excess of \$500.  
(Section 106.03, Florida Statutes)

(PLEASE TYPE)

1. Full Name of Committee	Date
Mailing Address (if post office) SANIBEL GOOD GOVERNMENT COALITION PO BOX 1072 SANIBEL FL 33957 395-I 721	Telephone (     )
City	Zip Code

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)		
Name of Affiliated or Connected Organization	Mailing Address	Relationship
NONE		

3. Area, Scope and Jurisdiction of the Committee **THE SGGC WILL OPERATE ON SANIBEL ISLAND TO BRING ITS MEMBERS (RESIDENTS AND BUSINESSES) TOGETHER TO RESEARCH AND DEVELOP COMMON POSITIONS ON MUNICIPAL, COUNTY WIDE ISSUES AND CANDIDATES IN HARMONY WITH THE CITY'S VISION STATEMENT.**

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)  
**CITY OF SANIBEL ISSUES, INCLUDING THOSE LEE COUNTY MATTERS APPLICABLE TO SANIBEL RESIDENTS AND BUSINESSES.**

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)		
Full Name	Mailing Address	Committee Title or Position
<b>STEVEN B. SMITH</b>	<b>4117 W. GULF DR SANIBEL FL 33957</b>	<b>CHAIRMAN / DEPUTY TREASURER</b>
<b>MONI ARNOWITZ</b>	<b>9027 MOCKINGBIRD DR SANIBEL FL 33957</b>	<b>TREASURER</b>
<b>MARILYN WEST</b>	<b>5411 OSPREY CT SANIBEL FL 33957</b>	<b>SECRETARY</b>

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

CHECK APPROPRIATE BOX

- Original Appointment
- Deputy Treasurer
- Reappointment of Treasurer
- Secondary Depository

(PLEASE TYPE)

1. Committee \_\_\_\_\_ address \_\_\_\_\_

SANIBEL GOOD GOVERNMENT  
COALITION  
PO BOX 1072  
SANIBEL FL 33967  
395-1 721

Telephone (of \_\_\_\_\_) \_\_\_\_\_

5. State \_\_\_\_\_ 6. Zip Code \_\_\_\_\_

The following person has been appointed to serve as  Campaign Treasurer  Deputy Treasurer for the above named committee.

7. Name of Treasurer or Deputy Treasurer \_\_\_\_\_ 8. Street Address \_\_\_\_\_

MONI ARNOWITZ  
9627 MOCKINGBIRD DR  
SANIBEL FL 33957  
3328818

11. State \_\_\_\_\_ 12. Zip Code \_\_\_\_\_

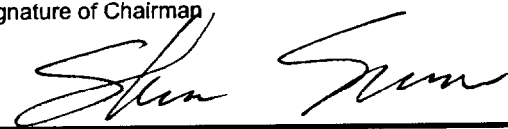
I have designated the following named bank as my  Primary Depository  Secondary Depository

13. Bank Name \_\_\_\_\_ 14. City \_\_\_\_\_

BANK OF THE ISLANDS  
1699 PERIWINKLE WAY  
SANIBEL FL 33957

15. City \_\_\_\_\_ 18. Zip Code \_\_\_\_\_

19. Name of Chairman \_\_\_\_\_ 20. Signature of Chairman \_\_\_\_\_

STEVEN B. SMITH X 

Campaign Treasurer's Acceptance of Appointment

I, MONI ARNOWITZ, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer  Deputy Treasurer for the SANIBEL GOOD GOVT COALITION

Committee. As a duly registered voter in LEE CO. 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.

5/5/02  
Date

X   
Signature of Campaign Treasurer or Deputy Treasurer

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

CHECK APPROPRIATE BOX

- Original Appointment
- Deputy Treasurer
- Reappointment of Treasurer
- Secondary Depository

(PLEASE TYPE)

1. Committee Name

SANIBEL GOOD GOVERNMENT  
COALITION  
P O BOX 1072

Telephone (optional)  
( )

SANIBEL FL 33957  
395-i 721

5. State

6. Zip Code

The following person has been appointed to serve as

Campaign Treasurer

Deputy Treasurer

for the above named committee.

7. Name

Address

STEVEN B SMITH  
4117 W GULF DR  
SANIBEL FL 33957

9. City

3951721

11. State

12. Zip Code

I have designated the following named bank as my

Primary Depository

Secondary Depository

13. Bank Name

BANK OF THE ISLANDS  
1699 PERIWINKLE WAY  
SANIBEL FL 33957

15. City

State

18. Zip Code

19. Name of Chairman

20. Signature of Chairman

STEVEN B. SMITH

X



Campaign Treasurer's Acceptance of Appointment

I, STEVEN B SMITH, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer

Deputy Treasurer

for the

SANIBEL GOOD GOVT COALITION

Committee. As a duly registered voter in

LEE CO.

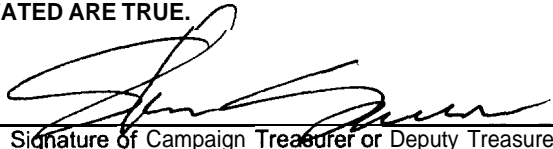
County, Florida, I am

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.

8 MAY 2002  
Date

X

  
Signature of Campaign Treasurer or Deputy Treasurer