

CANDIDATE FACT SHEET

THE COMPLETION OF THIS SHEET WILL
FACILITATE THE OPENING OF YOUR CAMPAIGN
ACCOUNT BY OUR OFFICE

(PLEASE PRINT)

NAME AS YOU WANT IT TO APPEAR ON THE BALLOT

PAUL SANBORN

RESIDENCE ADDRESS:

5346 COLONADE COURT

MAILING ADDRESS:

5346 COLONADE COURT

CITY/ZIP CODE:

CAPE CORAL, 33904

CITY/ZIP CODE:

CAPE CORAL, 33904

TELEPHONE #: 941

TELEPHONE #:

TELEPHONE #: 941

HOME: 542-4070 WORK: —

DAYTIME: 542-4070

OFFICE SOUGHT AND DISTRICT IF APPLICABLE:

LEE COUNTY MOSQUITO CONTROL BOARD AREA 7

PARTY (BELOW)

NP

DATE:

7-6-00

DATE OF BIRTH OR
VOTER ID #:

9-3-23

CANDIDATE SIGNATURE:

Paul W Sanborn

THIS FORM IS FOR USE ONLY IN LEE COUNTY 04-99 SOE APPROVED

IF YOU ARE QUALIFYING **BY MAIL**
BESURE TO INCLUDE THIS SHEET WITH YOUR
QUALIFYING PAPERWORK

PHILINDA A. YOUNG
Supervisor of Elections
P O BOX 2545
Fort Myers FL 33902-2545
Telephone (339-6300)

JUL 7 8 54 AM '01
SUPERVISOR OF ELECTIONS
LEE COUNTY

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
 Section **106.021(1)** FS

CHECK APPROPRIATE BOX

ORIGINAL APPOINTMENT DEPUTY TREASURER REAPPOINTMENT OF TREASURER SECONDARY DEPOSITORY

PLEASE TYPE OR PRINT

Name of Candidate (AS YOU WANT IT TO APPEAR ON BALLOT) PAUL SANBORN		Address (include P O Box, street, city, state, zip code) 5346 COLONADE COURT, CAPE CORAL, FL. 33904	
Telephone (Daytime) 941-542-4070	Party (Partisan Candidates Only) - NP	Office Sought (include district, circuit or group number) LEE COUNTY MOSQUITO CONTROL BOARD	

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

Name of Treasurer or Deputy Treasurer

PAUL SANBORN

Mailing Address (if P O Box or drawer add street address)

5346 COLONADE COURT

Telephone (Daytime)

941-542-4070

City CAPE CORAL	County LEE	State FLORIDA	Zip Code 33904
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I have designated the following named bank as my Primary Depository Secondary Depository

Name of Bank

CAPE CORAL NATIONAL BANK

Street Address

2724 DEZ PRADO BLVD.

City CAPE CORAL	County LEE	State FLORIDA	Zip Code 33904
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I WILL NOTIFY YOU OF ANY ADDITIONS OR CHANGES TO THESE APPOINTMENTS

Signature of Candidate X Paul Sanborn	Date Signed 7-6-00	Voter ID# or D. O. B. 9-3-23
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CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT

I, **PAUL SANBORN** do hereby accept the appointment as
 (Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of **PAUL SANBORN**
 who is seeking nomination or election as a **NP** candidate to the office of
 (Party)

LEE COUNTY MOSQUITO CONTROL BOARD As a duly registered voter in **LEE** County,

Florida, I am qualified to accept this appointment.

X Paul Sanborn **7-6-00**
 Signature of Campaign Treasurer or Deputy Treasurer Date Signed

STATEMENT OF CANDIDATE LEE COUNTY - FLORIDA

FLORIDA STATUTE CHAPTER 106.023

Each candidate must file a statement of candidate with the qualifying officer within 10 days after he files his Appointment of Campaign Treasurer and Designation of Campaign Depository, stating that he has read and understands the requirements of this chapter.

<u>STATEMENT OF CANDIDATE</u>	
<u>PLEASE PRINT</u>	
I, <u>PAUL SANBORN</u>	candidate for the office of
<small>Name of Candidate</small>	
<u>LEE COUNTY MOSQUITO CONTROL BOARD,</u>	have received, read, and
<small>Office Sought (include district, circuit., or group number)</small>	
understand the requirements of Chapter 106, Florida Statutes.	
X <u>Paul Sanborn</u>	<u>7-6-00</u>
<small>Signature of Candidate</small>	<small>Date Signed</small>

THIS DOCUMENT MUST BE SIGNED AND RETURNED TO THE OFFICE OF THE
SUPERVISOR OF ELECTIONS WITHIN 10 DAYS

MAIL TO:

Qualifying Officer
Lee County Elections Office
P O Box 2545
Fort Myers FL 33902-2545

IN PERSON:

Lee County Constitutional Complex
Lee County Elections Office 3rd Floor
2480 Thompson Street
Fort Myers FL 33901

IF YOU HAVE ANY QUESTIONS CONCERNING **THIS** FORM
CALL 339-6300

Philinda A. Young
Supervisor of Elections
Lee County - Florida

Mar-99

10, 11, 2000
JUL 7 2000
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