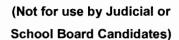
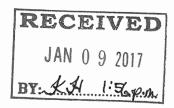
CANDIDATE OATH – NONPARTISAN OFFICE





OFFICE USE ONLY

OATH OF CANDIDATE								
(Section 99.021, Florida S	Statutes)							
1 1/2 hole Below								
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * NAM	E MAY NOT BE CHANGED AFTER THE END OF	OHALIEVING)						
(FLEAGE FRINT MAINE AS TOU MISH IT TO AFFEAR ON THE BALLOT MAIN	E MAT NOT BE GRANGED AFTER THE END OF	/ /						
am a candidate for the nonpartisan office of Council M	"AN,	6_,						
	(office)	(district #)						
,; I am a qualified elector of	//	County, Florida;						
(circuit #) (group or seat #)		,,						
I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.								
· // / / / / / / / / / / / / / / / / /	24.11	,						
X Nutres 15 des 1778	3/4 MANBIRE	101.00						
Signature of Candidate Telephone Number	Email Address							
-								
9/65 Hollow Pire Daive, Esters Address City	State Zi	P Code						
Candidate's Florida Voter Registration Number (located on your vot	er information card):							
* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):								
STATE OF FLORIDA								
COUNTY OF Lee								
Sworn to (or affirmed) and subscribed before me this day of, 20								
Personally Known: or	4/							
Produced Identification:	Signature of Notary Public Print, Type, or Stamp Commissioned Na	me of Notary Public						
Type of Identification Produced:	CAROLIN SAC MY COMMISSION # GO EXPIRES November 2	3050405						

Sompleman	RE	C	E	I	VE	D	STATE
THE PERSON NAMED IN COLUMN NAM	ę	JAN	0	5	201	17	CHEMICS CONTROL OF THE PARTY OF
SCOTOTO CONTRACTOR	BY:	Ł	H	, , , , , , , ,			Secretarion of the last

CANDIDATE CAMPAIGN FILE COVER SHEET

REVISED					
Nicholas BAlos					
9165 Hollow PiNE Drive					
ESTERO, Florida 34135					
Check if same as above.					
9165 Hollow Pine Drive					
ESTERO, Florida, 34135					
Daytime (list below) cell OP Alternate (list below) Home					
239.287.4708 0R 239.948-3741					
District 6					
SEPTEMBER 18, 1944					
1/5/17					
Weepler Batos					

All candidate-qualifying documents and campaign finance reports are posted on the Village of Estero website www.estero-fl.gov. Under Florida Law, a candidate's campaign contact information, such as address, telephone number, and email address are available to the public.

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

REC	E	I	V	14	D
JAN	0	5	2	01	7
BY. XH					

officer before opening the campaign account. OFFICE USE ONLY 1. CHECK APPROPRIATE BOX(ES): Re-filing to Change: Treasurer/Deputy Initial Filing of Form Depository 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) 9165 Hollow Pine Drive 4. Telephone 5. E-mail address 9165 Hollow Pine Drive (239) 948-3741 MRNBJRCAOL. Com ESTERO, Florida 34135 6. Office sought (include district, circuit, group number)

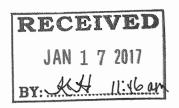
COUNCIL MAN DISTRICT 6 7. If a candidate for a nonpartisan office, check if applicable: My intent is to run as a Write-In candidate. 8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a candidate. Write-In No Party Affiliation Party 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer 10. Name of Treasurer or Deputy Treasurer 12. Telephone (239) 947-6736 13. City Primary Depository 18. I have designated the following bank as my 20. Address 21. City 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 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) Lienesch , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer designated above as: 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 c	ampaign account.	,g	OFFICE USE ONLY					
1. CHECK APPROPRIATE BOX(ES):								
☐ Initial Filing of Form	Re-filing to Change:	☑ Tr	easurer	/Deputy	Depository		Office	☐ Party
2. Name of Candidate (in this		ast)			le post office bo	•	-	
NICHOLAS BATOS			code	9165	Hollow	Pine	Dr.	
4. Telephone 5.	. E-mail address			Estero	, FL .	3413	35	
(239)948-3741 M	IRNBIR @ aol.	com						
6. Office sought (include dist	rict, circuit, group numb	oer)	7. If a candidate for a <u>nonpartisan</u> office, check if				check if	
Village of Es				applicat	My intent is to	run as a	Write-In	candidate.
					-			
8. If a candidate for a <u>partis</u>	an office, check block	and fill	in name	e of party as	applicable: N	/ly intent	is to run	as a
Write-In No Pa	rty Affiliation					Party	candi	date.
9. I have appointed the follo	wing person to act as	my	Ca	mpaign Trea	surer 💢 [Deputy T	reasurer	
10. Name of Treasurer or Dep	•							
NICHOLAS B.	970S							
11. Mailing Address 9165 Ho I/o ↔	P - D -				ı	Telepho		
9165 HO110W	rise Dr					. , .	48 -3	374/
13. City	14. County	15. Sta	te 16. Zip Code 17. E-mail address 34/35 MRN BJR @ aol. com					
ESTERO	LEE	FL					2012-110-110-110-110-110-110-110-110-110	
18. I have designated the fo	llowing bank as my	[>	∦ Prim	ary Depositor	ry 🔲 Sed	condary I	Deposito	ry
19. Name of Bank	1		20. Add	lress	- F	フ、		
FINEMARK B			100		ONUT A			
21. City	22. County			23. State		ŧ.	4. Zip Co <i>34/3</i>	
ESTERO				FL				<u> </u>
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 26			26. Signature of Candidate					
1/17/17 X			X Vietos Sola					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)								
I, NICHOLAS BATOS , do hereby accept the appointment								
(Please Print or Type Name)								
designated above as: Campaign Treasurer Deputy Treasurer.								
1/12/17 X								
Date Signature of Campaign Treasurer or Deputy Treasurer								
Signature of Campaign Treasurer of Deputy Treasurer								

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

JAN 0 5 2017 BY: 14

1, Nicholas BATOS

candidate for the office of Council member, DisT. 6 - Village of EsTeiro

have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

X Signature of Candidate

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 å fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).