

# LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

ORIGINAL

REVISED

<b>Candidate Name</b>	DIANE A. ZIGROSSI		
<b>Residence Address</b>	20012 PETRUCCA CIR N., UNIT D		
<b>City and Zip Code</b>	Lehigh Acres 33936		
<b>Mailing Address</b>	<input checked="" type="checkbox"/> Check if same as above.		<input type="checkbox"/> Check if different from residence.
<b>Telephone Number(s)</b>	<input checked="" type="checkbox"/> Daytime (list below)	OR	<input type="checkbox"/> Alternate (list below)
	815-735-8394		
<b>Email Address</b>	DONDY59@YAHOO.COM		
<b>Office Sought</b>	LEE County Commissioner - Dist 5		
<b>Area, District, Group or Seat #</b>	Dist. 5		
<p>➤ Judicial, School Board, Supervisor of Elections, and Special District Offices such as Community Development, Fire, Health System, Library and Mosquito Control are non-partisan offices. A candidate for any of these offices, must indicate "non-partisan" on the line below.</p> <p>➤ A candidate for a Constitutional Office or County Commission may file partisan or "No Party Affiliation" (NPA) and shall indicate a political party affiliation or "No Party Affiliation" on the line below.</p>			
➤ <b>Political Party For Office Sought</b>	Democratic		
<b>Date Of Birth or Voter Registration ID #</b>	4/22/1959		
<b>Date</b>	6/24/2015		
<b>Candidate Signature</b>	Diane A. Zigrassi		

All candidate-qualifying documents and campaign finance reports will be posted at the Lee County Supervisor of Elections website [www.leeelections.com](http://www.leeelections.com) or use the following link: [http://www.precinctfind.com/cand\\_lee2.html](http://www.precinctfind.com/cand_lee2.html) . Under Florida Law, a candidate's campaign-contact information, such as address, telephone number, and email address are available to the public. Do not hesitate to contact this office at (239) LEE-VOTE (239-533-8683) for more information about becoming a candidate for public office.

OFFICE USE ONLY

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

I, DIANE A. ZIGROSSI,

candidate for the office of LEE County Commissioner - Dist 5;

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

X DIANE A. ZIGROSSI  
Signature of Candidate

6/24/2015  
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).

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

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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)

DIANE A. ZIGROSSI

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

20012 PETRUCKA CIR N. UNIT D  
LEHIGH ACRES

4. Telephone

(815) 735-8394

5. E-mail address

DONDY59@YAHOO.COM

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

LEE COUNTY COMMISSIONER - DIST. 5

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     Democratic Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

DIANE A. ZIGROSSI

11. Mailing Address

20012 PETRUCKA CIR N. UNIT D

12. Telephone

(815) 735-8394

13. City

LEHIGH ACRES

14. County

LEE

15. State

FL

16. Zip Code

33936

17. E-mail address

DONDY59@YAHOO.COM

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

19. Name of Bank

Preferred Community Bank

20. Address

2511 Lee Blvd.

21. City

Lehigh Acres

22. County

LEE

23. State

FL

24. Zip Code

33971

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

6/24/2015

26. Signature of Candidate

X Diane A. Zigrossi

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

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

designated above as:     Campaign Treasurer     Deputy Treasurer.

6/24/2015  
Date

X Diane A. Zigrossi  
Signature of Campaign Treasurer or Deputy Treasurer

\*15 JUN 24 PM 02:29 SJL EEE CD F1

**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)

*Diane A. Zigrassi*

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

*20012 Petreuck A Cr. N Unit D  
Lehigh Acres, FL 33936*

4. Telephone

*(815) 735-8394*

5. E-mail address

*DONDY59@yahoo.com*

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

*Lee County Commissioner District 5*

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     Democratic Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

*Michael Shayne Swords*

11. Mailing Address

*P.O. Box 127*

12. Telephone

*(239) 745-5211*

13. City

*Lehigh Acres*

14. County

*Lee*

15. State

*FL*

16. Zip Code

*33970*

17. E-mail address

*michaelswords@hotmail.com*

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

19. Name of Bank

*Preferred Community Bank*

20. Address

*2511 Lee Blvd*

21. City

*Lehigh Acres*

22. County

*Lee*

23. State

*Florida*

24. Zip Code

*33971*

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

*6/24/2015*

26. Signature of Candidate

*X Diane A Zigrassi*

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

I, *Michael Shayne Swords*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

*6/24/2015*

Date

*X Michael S Swords*

Signature of Campaign Treasurer or Deputy Treasurer