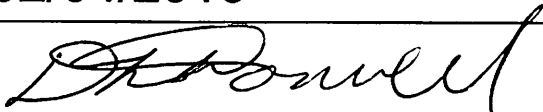


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

☒ ORIGINAL

☐ REVISED

Candidate Name	Dr. Derrick L. Donnell		
Residence Address	1820 NE Van Loon Terrace		
City and Zip Code	Cape Coral 33909		
Mailing Address	<input checked="" type="checkbox"/> Check if same as above.		<input type="checkbox"/> Check if different from residence.
Telephone Number(s)	<input checked="" type="checkbox"/> Daytime (list below)	OR	<input type="checkbox"/> Alternate (list below)
	239-677-5257		
Email Address	VoteforDrDonnell@yahoo.com		
Office Sought	Lee County School Board		
Area, District, Group or Seat #	District 7		
<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>			
➤ Political Party For Office Sought	non-partisan		
Date Of Birth or Voter Registration ID #	08/29/1963		
Date	02/04/2016		
Candidate Signature			

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://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.

*16FEB05AM0834 SGE LEE CO 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)

Dr. Derrick L. Donnell

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

1820 NE Van Loon Terrace
Cape Coral, FL 33909

4. Telephone

(239) 677-5257

5. E-mail address

votefordrdonnell@yahoo.com

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

Lee County School Board District 7

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 ☐ _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Mrs. Sherri Donnell

11. Mailing Address

1820 NE Van Loon Terrace

12. Telephone

(239) 677-7638

13. City

Cape Coral

14. County

Lee

15. State

FL

16. Zip Code

33909

17. E-mail address

VoteforDrDonnell@yahoo.com

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

19. Name of Bank

Wells Fargo

20. Address

113 Hancock Bridge Parkway West

21. City

Cape Coral

22. County

Lee

23. State

Florida

24. Zip Code

33991

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

02/04/2016

26. Signature of Candidate

☒ 

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

I, Mrs. Sherri Donnell, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer.

02/04/2016

Date

☒ 

Signature of Campaign Treasurer or Deputy Treasurer

16FEB05AM0834 SDE LEE COPI

**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)

Dr. Derrick L. Donnell

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

1820 NE Van Loon Terrace
Cape Coral, Fl, 33909

4. Telephone

(239) 677-5257

5. E-mail address

VoteforDrDonnell@yahoo.com

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

Lee County School Board District 7

**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 ☐ _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Dr. Derrick L. Donnell

11. Mailing Address

1820 NE Van Loon Terrace

12. Telephone

(239) 677-5257

13. City

Cape Coral

14. County

Lee

15. State

Fl

16. Zip Code

33909

17. E-mail address

VoteforDrDonnell@yahoo.com

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

19. Name of Bank

Wells Fargo

20. Address

113 Hancock Bridge Parkway West

21. City

Cape Coral

22. County

Lee

23. State

Fl

24. Zip Code

33991

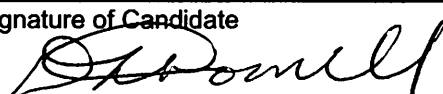
**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND
DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

25. Date

02/04/2016

26. Signature of Candidate

X



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

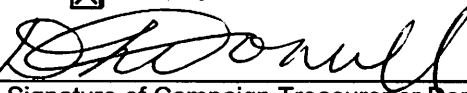
I, Dr. Derrick L. Donnell, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☐ Campaign Treasurer ☒ Deputy Treasurer.

02/04/2016

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

I, Dr. Derrick L. Donnell,

candidate for the office of Lee County School Board District 7;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X 
Signature of Candidate

02/04/2016
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).