

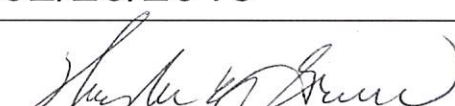


# LEE COUNTY ELECTIONS

## CANDIDATE CAMPAIGN FILE COVER SHEET

 ORIGINAL

 REVISED

Candidate Name	Nancy M. McGovern		
Residence Address	785 Entradara Drive South		
City and Zip Code	Fort Myers, Fl. 33919		
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)
	239-850-1539		
Campaign Email Address	nmemcg@aol.com		
Campaign Website			
Office Sought	Lee Health Board of Directors		
Area, District, Group or Seat #	District 2		
<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 #	03/03/1955		
Date	02/26/2018		
Candidate Signature			

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website [www.lee.vote](http://www.lee.vote) or visit the following link: <http://www.lee.vote/campaigns/candidate-packets/> and <http://www.lee.vote/campaigns/candidate-finance-reports/>. 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.

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

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

(PLEASE PRINT OR TYPE)

11201400001230 SUB LEE (04)

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)

Nancy M McGovern

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

785 Entrada Dr South  
Fort Myers, FL 33919

4. Telephone

(239 ) 850-1539

5. E-mail address

mmemcg@aol.com

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

Lee Memorial Health Systems  
District 2

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

Nancy McGovern

11. Mailing Address

785 Entrada Drive South

12. Telephone

( 239 ) 850-1539

13. City

Fort Myers

14. County

Lee

15. State

FL

16. Zip Code

33919

17. E-mail address

mmemcg@aol.com

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

19. Name of Bank

Edison National Bank

20. Address

2105 First Street

21. City

Fort Myers

22. County

Lee

23. State

FL

24. Zip Code

33901

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

03/06/2018

26. Signature of Candidate

*Nancy M McGovern*

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

I, Nancy McGovern, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

03/06/2018  
Date

*Nancy M McGovern*  
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

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

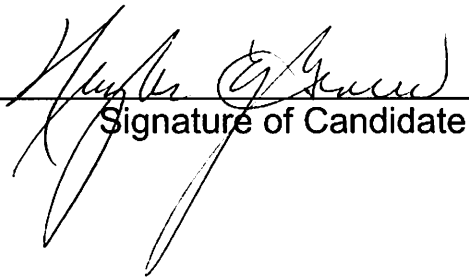
OFFICE USE ONLY

THIS POSITION IS SUBJECT TO THE

I, Nancy M. McGovern ,  
candidate for the office of Lee Health System BOD Dist. 2 ;

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

X

  
Signature of Candidate

02/26/2018  
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).