



LEE COUNTY ELECTIONS

CANDIDATE CAMPAIGN FILE COVER SHEET

☐ ORIGINAL

☐ REVISED

Candidate Name	JOSEPHINE M. GAGLIARDI		
Residence Address	P.O. Box 2925		
City and Zip Code	Fort Myers, FL 33902-2925		
Mailing Address	<input checked="" type="checkbox"/> Check if same as above. <input checked="" type="checkbox"/> Check if different from residence.		
Telephone Number(s)	<input checked="" type="checkbox"/> Daytime (list below) (239) 560-6440	OR	<input type="checkbox"/> Alternate (list below)
Campaign Email Address	josephine.gagliardi2020@gmail.com		
Campaign Website	NONE		
Office Sought	County Court Judge		
Area, District, Group or Seat #	Group 6		
➔ 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. ➔ 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.			
➔ Political Party for Office Sought	NPA Non Partisan		
Date of Birth or Voter Registration ID #	111515750		
Date	1/9/2020		
Candidate Signature			

The Lee County Supervisor of Elections posts all candidate-qualifying documents and campaign finance reports on its website 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)

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)

JOSEPHINE M. GAGLIARDI

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

P.O. Box 2925

Fort Myers, FL 33902-2925

4. Telephone

(239) 560-6440

5. E-mail address

Josephine.gagliardi.2020@gmail.com

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

County Court Judge Group 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

☐ 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

JOSEPHINE M. GAGLIARDI

11. Mailing Address

P.O. Box 2925, Fort Myers, FL 33902-2925

12. Telephone

(239) 560-6440

13. City

Fort Myers

14. County

Lee

15. State

FL

16. Zip Code

33902

17. E-mail address

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

19. Name of Bank

IBERIA BANK

20. Address

2247 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

11/9/2020

26. Signature of Candidate

X

Josephine Gagliardi

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

I, JOSEPHINE M. GAGLIARDI, do hereby accept the appointment
(Please Print or Type Name)

designated above as: ☒ Campaign Treasurer ☐ Deputy Treasurer

11/9/2020

Date

X

Josephine Gagliardi

Signature of Campaign Treasurer or Deputy Treasurer

(Please print or type)

204H03H0300 STEEL and CO.

X


Signature of Candidate

Signature of Candidate

1/9/2020

Date _____

DS-DE 84 (05/11)

**STATEMENT OF
CANDIDATE
FOR JUDICIAL OFFICE**

(Section 105.031(5), F.S.)

(Please Type)

OFFICE USE ONLY

I, JOSEPHINE M. GAGLIARDI

a judicial candidate, have received, read, and understand the requirements
of the Florida Code of Judicial Conduct.

Josephine Gagliardi
(Signature of candidate)

1/9/2020
(Date)

Each candidate for judicial office, including an incumbent judge, shall file a statement with the qualifying officer, within 10 days after filing the Appointment of Campaign Treasurer and Designation of Campaign Depository.