LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

⊠ ORIGINAL	REVISED 3
Candidate Name	George P. Fitzgerald III M.D
Residence Address	1818 Aromore RD.
City and Zip Code	Ft myers, FL 33907 Check if same as above. XCheck if different from residence.
	Check if same as above.
Mailing Address	3594 Broadway Suite E
	Ft Myers, FL 33901
Telephone Number(s)	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
	239-332-7926
Email Address	apfilind (Dicloud, Com Lee memorial Health Systems
Office Sought	Board of Directors
Area, District, Group or Seat #	District 2
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	"NON-Partisan"
Date Of Birth	
or Voter Registration ID #	December 7, 1946
Date	JUNE 5, 2014
Candidate Signature	x 6/Fitzgoraldump

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.

LEE COUNTY—FLORIDA AFFIDAVIT OF INTENT SPECIAL DISTRICT CANDIDATE

A special district candidate is prohibited from financing ANY PORTION OF his/her campaign with personal funds except as provided in this affidavit

State of Florida County of Lee 14JUN12PM0339 SUE LEE (0) F1

I, George P. Fitzgerald TIMD, am a candidate for the independent special

district office of:

Lee Memorial Health Systems Board of Directors, Dist2

in the <u>November 4, 2014 General Election</u>. I declare that my <u>only campaign expense</u>, from personal funds, shall be the \$25 candidate-qualifying fee OR the signature verification fee for candidates who qualify by the candidate-petition method by submitting the valid signatures of 25 registered voters residing within the District boundaries.

Provided that this is my only campaign expense, I will not be required to: appoint a campaign treasurer, designate a campaign depository or file periodic campaign treasurer's reports as required by Florida Statutes §99.061 or §106.07. I understand that I am prohibited from expending, collecting, soliciting, or accepting any money or contribution(s) in-kind, in connection with my campaign.

In the event I later decide to, collect, solicit, or accept any money or contribution(s) in-kind, or make any additional campaign expense, I understand that <u>prior to doing so, I am required to file Form DS-DE 9</u> (Appointment of Campaign Treasurer/Designation of Campaign Depository <u>Form</u>) with the Lee County Supervisor of Elections. My campaign shall then be subject to campaign finance regulations in accordance with Florida Statutes, Chapter 106 and I will be required to file periodic campaign treasurer's reports, as required by Florida Statute §106.07, with the Lee County Supervisor of Elections.

Signature of Candidate

5/Jun/14
Date

FS 106.021[1][a] "No person shall accept any contribution of make any expensiture with a view to be aging about his or her nomination, election, or retention in public office, or authorize another to accept so a contributions or make such expenditure on the person's behalf, unless such person has appointed a campaign treasurer and designated a primary campaign depository. History 2007 HB537, FS 99.061, FS 106.021 Revised-03/11/14 (Lee County Special District Forms)