

LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	DANIEL J. DE SANTIS		
Residence Address	9130 HOLLOW PINE DRIVE		
City and Zip Code	BONITA SPRINGS 34135		
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239-390-9373	OR	
Email Address	dndesantis@comcast.net		
Office Sought			
Area, District, Group Or Seat Number	BROOKS OF BONITA SPRINGS I SEAT 2		
Political Party (If Applicable)	NON-PARTISAN		
Date Of Birth Or Voter ID #	VOTER REGISTRATION NUMBER 111307919		
Date	5/19/2008		
Candidate Signature	X <i>Daniel DeSantis</i>		

All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.

Candidates who provide an email address may be contacted by this office, via the email address provided by the candidate, for campaign related communications that pertain exclusively to the candidate's campaign.

All other mailings from this office, which pertain to every candidate, will be via United States Postal Service.

SCANNED

**STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

(PLEASE TYPE)

OFFICE USE ONLY**CHECK APPROPRIATE BOX:**☒ Original Appointment

DESANTIS, DANIEL J
9130 HOLLOW PINE DR
BONITA SPRINGS FL 34135

111307919

☐ Secondary Depository

Name of Candidate

r street, city, state, zip code)

Telephone (optional)

2. Party (Partisan candidates only)

3. Office (add district, circuit, group number)

(239) 390-9373

NON

BROOKS I CDD (5-2)

I have appointed the following person to act as my

☒ Campaign Treasurer☐ Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer

111307919

5. Me

DESANTIS, DANIEL J
9130 HOLLOW PINE DR
BONITA SPRINGS FL 34135

6. Telephone

(239) 390-9373

7. Cit

ate

10. Zip Code

I have designated the following named bank as my

☒ Primary Depository☐ Secondary Depository

11. Name of Bank

12. Street Address

WACHOVIA

8700 CORKSCREEN RD

13. City

14. County

15. State

16. Zip Code

BONITA SPRINGS

LEE

FL

17. Signature of Candidate

Date

X Daniel J Desantis

5/19/08

Campaign Treasu

111307919

I, _____
(Please Print or Type)

DESANTIS, DANIEL J
9130 HOLLOW PINE DR
BONITA SPRINGS FL 34135

Appointment as

☒ Campaign Treasurer ☐ Deputy Treasurer

who is seeking nomination or election as a

NON
(Party)

candidate to the office of

As a duly registered voter in

LEE

County, Florida, I am qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

5/19/08
Date

X Daniel J Desantis
Signature of Campaign Treasurer or Deputy Treasurer

SCANNED

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

OFFICE USE ONLY

(Please)

DESANTIS, DANIEL J
9130 HOLLOW PINE DR
BONITA SPRINGS FL 34135

111307919

I, _____,

candidate for the office of BROWNS CDD SEAT 2;

have received, read and understand the requirements of Chapter 106,

Florida Statutes.

X✓ Daniel J. Desantis
Signature of Candidate

✓ June 2, 2008
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).

AFFIDAVIT OF INTENT LEE COUNTY SPECIAL DISTRICT CANDIDATE

State of Florida
County of Lee

I, DANIEL J. DE SANTIS, a candidate for the
(print name)

special district office of: BROOKS OF BONITA SPRINGS I
SEAT # 2 (JAMES A. MERRITT INCUMBENT)
(district name and district #, seat #, or area#)

in the November 4, 2008 General Election. I understand that my only campaign expense, from personal funds, shall be the \$25 candidate-qualifying-fee or the signature verification fee for candidates who qualify by submitting 25 valid candidate petition signatures.

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 and, therefore, I am prohibited from 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 campaign expense, I understand that I will be required to file Form DS-DE 9 (Appointment of Campaign Treasurer/Designation of Campaign Depository) 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.

☒ Daniel De Santis
Signature of Candidate

5/19/2008
Date

SCANNED

LOYALTY OATH FOR NON-PARTISAN OFFICE

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

Lee, COUNTY

OFFICIAL USE ONLY

I,

DANIEL

First Name

JOSEPH

Middle Name/Initial

DE SANTIS

Last Name

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I,

DANIEL J. DE SANTIS

(PLEASE PRINT NAME AS YOU WISH IT TO BE WRITTEN IN ON THE BALLOT — NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of BOARD MEMBER BROOKS OF BONITA SPRINGS CDDI

My legal residence is 9130 HOLLOW PINE DRIVE BONITA SPRINGS FL 34135 LEE County, Florida. I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected. I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes.

X

Daniel DeSantis

(239) 390-9373

dndsantis@comcast.net

Signature of Candidate

Daytime Telephone Number

Email Address

9130 HOLLOW PINE DRIVE

BONITA SPRINGS

FL

34135

Address

City

State

ZIP Code

Sworn to (or affirmed) and subscribed before me this 22 day of MAY, 2008.

Personally Known: ☒ or

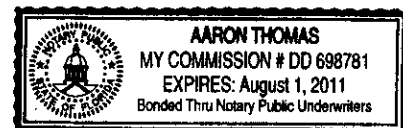
Produced Identification: _____

Type of Identification Produced: _____

Aaron Thomas

Signature of Notary Public — State of Florida

Print, Type or Stamp Commissioned Name of Notary Public



Please print or type your name, mailing address, agency name, and position below:

FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME:

DE SANTIS DANIEL JOSEPH

MAILING ADDRESS:

9130 HOLLOW PINE DRIVE

CITY: ZIP: COUNTY:

BONITA SPRINGS 34135 LEE

NAME OF AGENCY:

BROOKS OF BONITA SPRINGS I CDD

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

BOARD MEMBER SEAT #2

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF ☒ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

FOR OFFICE
USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

****BOTH PARTS OF THIS SECTION MUST BE COMPLETED****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):

☒ DECEMBER 31, 2007 OR ☐ SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

☒ COMPARATIVE (PERCENTAGE) THRESHOLDS OR ☐ DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
VANGUARD INVESTMENTS	THE VANGUARD GROUP P.O. BOX 2600 VALLEY FORGE PA 19482-2600	INVESTMENT CO.
PENSION	PECO ENERGY C/O MELLON BANK, N.A. P.O. BOX 569 PITTSBURGH PA 15230-0569	ELECTRIC & NATURAL GAS UTILITY CO.
SOCIAL SECURITY	U.S. TREASURY WASH. D.C.	

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
NONE			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

N/A

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

OTHER  you may need to file are described on page 6.

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PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

N/A

PART E — LIABILITIES [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

NONE

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]

BUSINESS ENTITY # 1

BUSINESS ENTITY # 2

BUSINESS ENTITY # 3

NAME OF
BUSINESS ENTITY

NONE

ADDRESS OF
BUSINESS ENTITYPRINCIPAL BUSINESS
ACTIVITYPOSITION HELD
WITH ENTITYI OWN MORE THAN A 5%
INTEREST IN THE BUSINESSNATURE OF MY
OWNERSHIP INTERESTIF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

SIGNATURE (required):

Daniel M. Santis

DATE SIGNED (required):

*June 2, 2008***FILING INSTRUCTIONS:****WHAT TO FILE:**

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

NOTE:**MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Blvd. South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

WHEN TO FILE:

Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

**AMENDED
REPORT**

(1) DANIEL J DE SANTIS
Name

(2) 9130 HOLLOW PINE DR, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate (office sought): BROOKS I CDD-2

☐ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10/31/2008 To 2/2/2009 / Report Type TR-4

☐ Original ☒ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 48.55

Loans \$ 0.00

Total Monetary \$ 48.55

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 748.55

(10) TOTAL Monetary Expenditures To Date
\$ 748.55

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) DANIEL J. DE SANTIS

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) DANIEL J. DE SANTIS

☒ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77

10/31/2008 2/2/2009

(3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
1/27/2009 / /	DeSantis, Daniel J 9130 Hollow Pine Drive Bonita Springs, FL 34135	O balance account <b	CA		Add	\$48.55
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DANIEL J DE SANTIS

(2) I.D. Number 77

(3) Cover Period 10/31/2008 through 2/2/2009

(4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
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FINAL REPORT

(3) ID Number. _____

CK IF PC HAS DISBANDED

77

(3) **ID Number:**

09 JAN 30 PM 0333 SDE Lee Co FI

09/JAN/80 0333 SDE Lee Co-F1

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77

10/31/2008 2/2/2009

(3) Cover Period 10/31/2008 through 2/2/2009 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77
 (3) Cover Period 10/31/2008 through 2/2/2009 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
1/28/2009 / /	DeSantis, Daniel J 9130 Hollow Pine Drive Bonita Springs, FL 34135	to close campaign fund checking account	MO		\$202.70
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

08 OCT 11 AM 10:47 SDE Lee Co FL

(1) DANIEL J DE SANTIS

Name

(2) 9130 HOLLOW PINE DR, BONITA SPRINGS, FL 34135

Address (number and street)

City, State, Zip Code

☐ **CHECK IF ADDRESS HAS CHANGED**

(3) ID Number: _____

OFFICE USE ONLY

77

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** BROOKS I CDD-2

☐ **Political Committee**

☐ **Committee of Continuous Existence**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

☐ **CHECK IF PC HAS DISBANDED**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED**

(5) REPORT IDENTIFIERS

Cover Period: From 10/11/2008 To 10/30/2008 Report Type G4

☒ **Original** ☐ **Amendment** ☐ **Special Election Report** ☐ **Independent Expenditure Report**

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 9.40

Transfers to Office Account \$ 0.00

Total Monetary \$ 9.40

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 700.00

(10) TOTAL Monetary Expenditures To Date

\$ 545.85

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

DANIEL J. DE SANTIS
(Type name)

☐ Individual (only for electioneering commun.) ☒ **Treasurer** ☐ Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

DANIEL J. DE SANTIS
(Type name)

☐ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DANIEL J DE SANTIS

(2) I.D. Number 77

(3) Cover Period 10/11/2008 through 10/30/2008

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
10/24/2008 / /	Post Office, Broadway Estero, FL 339289	mailing stamps	MO		\$9.40
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77

10/11/2008 10/30/2008

(3) Cover Period 10/11/2008 through 10/30/2008 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
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FLORIDA DEPARTMENT OF STATE CAMPAIGN TREASURER'S REPORT SUMMARY	
(1) DANIEL J DE SANTIS <u>Name</u> (2) 9130 HOLLOW PINE DR, BONITA SPRINGS, FL 34135 <u>Address (number and street)</u> <u>City, State, Zip Code</u> <input type="checkbox"/> CHECK IF ADDRESS HAS CHANGED	OFFICE USE ONLY 77 (3) ID Number: _____
(4) Check appropriate box(es): <input checked="" type="checkbox"/> Candidate (office sought): <u>BROOKS I CDD-2</u> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Political Committee <input type="checkbox"/> CHECK IF PC HAS DISBANDED </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Committee of Continuous Existence <input type="checkbox"/> CHECK IF CCE HAS DISBANDED </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Party Executive Committee <input type="checkbox"/> CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Electioneering Communication </div>	
(5) REPORT IDENTIFIERS Cover Period: From <u>9/27/2008</u> To <u>10/10/2008</u> , Report Type <u>G3</u> <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment <input type="checkbox"/> Special Election Report <input type="checkbox"/> Independent Expenditure Report	
(6) CONTRIBUTIONS THIS REPORT Cash & Checks \$ <u> 0.00</u> Loans \$ <u> 0.00</u> Total Monetary \$ <u> 0.00</u> In-Kind \$ <u> 0.00</u>	(7) EXPENDITURES THIS REPORT Monetary Expenditures \$ <u> 465.94</u> Transfers to Office Account \$ <u> 0.00</u> Total Monetary \$ <u> 465.94</u> (8) Other Distributions \$ <u> 0.00</u>
(9) TOTAL Monetary Contributions To Date \$ <u> 700.00</u>	(10) TOTAL Monetary Expenditures To Date \$ <u> 536.45</u>
(11) CERTIFICATION It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) <div style="display: flex;"> <div style="flex: 1; padding-right: 10px;"> I certify that I have examined this report and it is true, correct, and complete. (Type name) <u>DANIEL J. DESANTIS</u> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer </div> <u>X Daniel Desantis</u> Signature </div> <div style="flex: 1;"> I certify that I have examined this report and it is true, correct, and complete. (Type name) <u>DANIEL J. DESANTIS</u> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization) </div> <u>X Daniel Desantis</u> Signature </div> </div>	

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77

9/27/2008 10/10/2008

(3) Cover Period 9/27/2008 through 10/10/2008 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name DANIEL J DE SANTIS

(2) I.D. Number 77

(3) Cover Period 9/27/2008 through 10/10/2008

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
9/27/2008 / /	Office Max, Coconut Point Mall Estero, FL 33928	print and fold mailing	MO		\$87.57
1					
9/29/2008 / /	Supervisor of Elections, PO Drawer Fort Myers, FL 33902	mailing list	MO		\$44.67
2					
9/29/2008 / /	US Post Office, Broadway Ave. Estero, FL 33928	stamps for mailing	MO		\$294.00
3					
9/27/2008 / /	Office Max, Coconut Point Mall Estero, FL 33928	various mailing items	MO		\$39.70
4					
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) DANIEL J DE SANTIS

Name

(2) 9130 HOLLOW PINE DR, BONITA SPRINGS, FL 34135

Address (number and street)

City, State, Zip Code

☐ **CHECK IF ADDRESS HAS CHANGED**

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** BROOKS I CDD-2

☐ **Political Committee**

☐ **Committee of Continuous Existence**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

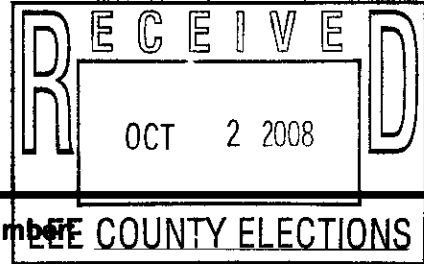
☐ **CHECK IF PC HAS DISBANDED**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED**

OFFICE USE ONLY

77



(3) **ID Number**

LEE COUNTY ELECTIONS

(5) REPORT IDENTIFIERS

Cover Period: From 9/13/2008 To 9/26/2008 / **Report Type** G2

☒ **Original** ☐ **Amendment** ☐ **Special Election Report** ☐ **Independent Expenditure Report**

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 200.00

Loans \$ 0.00

Total Monetary \$ 200.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 10.12

Transfers to Office Account \$ 0.00

Total Monetary \$ 10.12

(8) **Other Distributions**
\$ 0.00

(9) **TOTAL Monetary Contributions To Date**

\$ 700.00

(10) **TOTAL Monetary Expenditures To Date**

\$ 70.51

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) DANIEL J. DE SANTIS

☐ Individual (only for electioneering commun.) ☒ **Treasurer** ☐ Deputy Treasurer

X Daniel J De Santis
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) DANIEL J. DE SANTIS

☒ **Candidate** ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X Daniel J De Santis
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77

9/13/2008 9/26/2008

(3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
9/26/2008 / /	DeSantis, Daniel J 9130 Hollow Pine Drive Bonita Springs, FL 34135	I	retired	CH			\$200.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name DANIEL J DE SANTIS

(2) I.D. Number 77

(3) Cover Period 9/13/2008 through 9/26/2008

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
9/26/2008 / /	Lee County Supervisor Of Elect, Lee County Fort Myers, FL	mailing list	MO		\$10.12
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) DANIEL J DE SANTIS
Name

(2) 9130 HOLLOW PINE DR, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate (office sought): BROOKS I CDD-2

☐ Political Committee

☐ CHECK IF PC HAS DISBANDED

☐ Committee of Continuous Existence

☐ CHECK IF CCE HAS DISBANDED

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 8/22/2008 To 9/12/2008 / Report Type G1

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 16.21

Transfers to Office Account \$ 0.00

Total Monetary \$ 16.21

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 500.00

(10) TOTAL Monetary Expenditures To Date

\$ 60.39

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) DANIEL J. DESANTIS

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

X hl Desantis
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) DANIEL J. DESANTIS

☒ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X hl Desantis
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77
 8/22/2008 9/12/2008
 (3) Cover Period 8/22/2008 through 9/12/2008 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DANIEL J DE SANTIS

(2) I.D. Number 77

8/22/2008 9/12/2008

(3) Cover Period / / through / /

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
8/23/2008 / /	Office Max, Coconut Point Shopping Center Estero, FL 34135	file folders	MO		\$16.21
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WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

DANIEL J DE SANTIS
9130 HOLLOW PINE DR
BONITA SPRINGS, FL 34135

Candidate's Name (Last, Suffix, First, Middle)
OR Political Committee, CCE or Party Name

OFFICE USE ONLY

77

BROOKS I CDD-2

Identification Number (Assigned by Division
of Elections)

Address (Number and Street)

Office Sought (Include District, Circuit or
Group Number)

City State Zip Code

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report. |
| <input type="checkbox"/> Political Committee | <input type="checkbox"/> Party Executive Committee | <input type="checkbox"/> Check here if PC or CCE has DISBANDED and will no longer file reports. |

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

- ☐ January
☐ April
☐ July
☐ October

PRIMARY ELECTION

- ☐ 32nd day prior
☐ 18th day prior
☐ 4th day prior

GENERAL ELECTION

- ☐ 46th day prior
☐ 32nd day prior
☐ 18th day prior
☐ 4th day prior

- ☐ TERMINATION REPORT
☐ SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

8/2/2008 through 8/21/2008 (F3)

X

Daniel De Santis
Signature

Aug. 20, 2008
Date

SIGNATURES REQUIRED FOR:

Candidates

Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees

Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Committees of Continuous Existence

Treasurer (s. 106.04(4)(c), F.S.)

Party Executive Committees

Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

08/16/21 PM 12:59:50 E Lee Co F1

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) DANIEL J DE SANTIS
Name
(2) 9130 HOLLOW PINE DR, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 77

(4) Check appropriate box(es):

☒ Candidate (office sought): BROOKS I CDD-2

☐ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 7/19/2008 To 8/1/2008 / Report Type F2

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary
Expenditures \$ 19.18

Transfers to Office
Account \$ 0.00

Total
Monetary \$ 19.18

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 500.00

(10) TOTAL Monetary Expenditures To Date

\$ 44.18

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

X Daniel J De Santis
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☒ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X Daniel J De Santis
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J DE SANTIS

(2) I.D. Number 77

7/19/2008

8/1/2008

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____

(4) Page 1 of 0

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(1) Name DANIEL J DE SANTIS

(2) I.D. Number 77

(3) Cover Period 7/19/2008 through 8/1/2008

(4) Page 1 **of** 1

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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) DANIEL J DE SANTIS
Name

(2) 9130 HOLLOW PINE DR, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 77

(4) Check appropriate box(es):

☒ Candidate (office sought): BROOKS I CDD-2

☐ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 4/1/2008 To 7/18/2008 / Report Type F1

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 500.00

Loans \$ 0.00

Total Monetary \$ 500.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 25.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 25.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 500.00

(10) TOTAL Monetary Expenditures To Date

\$ 25.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

X Daniel J De Santis
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☒ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X Daniel J De Santis
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DANIEL J. DE SANTIS (2) I.D. Number 77
 (3) Cover Period 4/1/2008 / 7/18/2008 through 7/18/2008 / 7/18/2008 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(9) Occupation	(10) Contribution Type	(11) In-kind Description	(12) Amendment	(13) Amount
5/22/2008 / /	DeSantis, Daniel J 9130 Hollow Pine Drive Bonita Springs, FL 34135	I	retired	CH			\$500.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DANIEL J DE SANTIS (2) I.D. Number 77
 4/1/2008 7/18/2008
 (3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
6/3/2008 / /	DeSantis, Daniel J 9130 Hollow Pine Drive Bonita Springs, FL 34135	candidate filing fee	MO		\$25.00
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08JUL21PM1222SDE Lee Co F1

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