

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) DIANE ZIGROSSI  
 Name  
 (2) 20012 PETRUCKA CIR N  
 Address (number and street)  
LEHIGH ACRES, FL 33936  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1133375]  
 Submitted on:  
 10/28/2016 16:15:56 (eastern)

Check here if address has changed

(3) ID Number: 1159

(4) Check appropriate box(es):

- Candidate Office Sought: COUNTY COMMISSIONER-5
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 10 / 15 / 2016 To 10 / 21 / 2016 Report Type: G6

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 320 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 320 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 9 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 9 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 15 , 224 . 77

### (10) TOTAL Monetary Expenditures To Date

\$        , 13 , 088 . 80

### (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 IE or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DIANE ZIGROSSI (2) I.D. Number 1159  
 10/15/2016 through 10/21/2016  
 (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
(6) Sequence Number							
10/19/2016 / /	DAVIES, SHARON 2623 SW 21st Place CAPE CORAL, FL 33914	I	retired	CH			\$300.00
1							
10/17/2016 / /	WATSON, JAMES 3530 Pine Fern Lane Bonita Springs, FL 34134	I		CA			\$20.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DIANE ZIGROSSI

(2) I.D. Number 1159

(3) Cover Period 10/15/2016 through 10/21/2016

(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					
10/21/2016 / / 1	PAYPAL, 2211 N FIRST STREET SAN JOSE, CA 95131	fee	MO		\$9.00
/ /					
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