

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) BRIAN DIGRAZIO  
 Name  
 (2) 20340 CORKSCREW RD  
 Address (number and street)  
ESTERO, FL 33928  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1200897]  
 Submitted on:  
 3/4/2020 21:58:15 (eastern)

Check here if address has changed

(3) ID Number: 1559

(4) Check appropriate box(es):

- Candidate Office Sought: SCHOOL BOARD-3
- 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 2 / 1 / 2020 To 2 / 29 / 2020 Report Type: 20M2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 370 . 00

Loans \$        , 1 , 000 . 00

Total Monetary \$        , 1 , 370 . 00

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

\$        , 3 , 263 . 90

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 899 . 74

### (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 BRIAN DIGRAZIO (2) I.D. Number 1559  
 2/1/2020 through 2/29/2020  
 (3) Cover Period / / through / / (4) Page 1 of 2

(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						
2/3/2020 / /	Taylor, Dorothy G 1101 SE 28th Terrace Cape Coral, FL 33904	I registered nurse	CH			\$30.00
1						
2/5/2020 / /	Thompson, Linda M 9009 Gladiolus Preserve Circle Fort Myers, FL 33908	I registered nurse	CH			\$20.00
2						
2/6/2020 / /	Centers, Sharlene 12536 Aubrey Ln Bokeelia, FL 33922	I registered nurse	CH			\$20.00
3						
2/7/2020 / /	Maigis, Cristin 2808 NW 18th Ave Cape Coral, FL 33993	I cna	CH			\$40.00
4						
2/7/2020 / /	Charles, Maylene 1629 Country Club Pkwy Lehigh Acres, FL 33936	I patient care liaison	CH			\$20.00
5						
2/8/2020 / /	Weisblat, Barry 4415 Frankie Ct North Fort Myers, FL 33903	I registered nurse	CH			\$20.00
6						
2/11/2020 / /	Jenner, Tara 8381 Tahiti Rd Fort Myers, FL 33967	I homemaker	CH			\$20.00
7						
2/12/2020 / /	Fayhee, Lori 9200 Lanthorn Way Estero, FL 33928	I census worker	CH			\$100.00
8						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name BRIAN DIGRAZIO (2) I.D. Number 1559  
 (3) Cover Period 2/1/2020 through 2/29/2020 (4) Page 2 of 2

(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				
2/14/2020 / /	DiGrazio, Robin 110 Bache Place Dunellen, NJ 08812	I	foundry worker	CH			\$100.00
9							
2/28/2020 / /	DiGrazio, Brian N 20340 Corkscrew Rd Esterro, FL 33928	S	registered LO nurse				\$1,000.00
10							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name BRIAN DIGRAZIO

(2) I.D. Number 1559

(3) Cover Period 2/1/2020 through 2/29/2020

(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
(6) Sequence Number					
/ /					
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