

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Victor Rios Campaign
 Name
 (2) 970 Cape Marco Dr., # 2302
 Address (number and street)
Marco Island, FL 34145
 City, State, Zip Code

RECEIVED

OCT -8 2018

CITY OF MARCO ISLAND

2:20

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

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

(5) Report Identifiers

Cover Period: From 09/29/18 To 10/05/18 Report Type: 2018 G4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . _____

Loans \$ _____, _____, 0 . _____

Total Monetary \$ _____, _____, 0 . _____

In-Kind \$ _____, _____, 0 . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, 1, 423 . 85

Transfers to Office Account \$ _____, _____, 0 . _____

Total Monetary \$ _____, 1, 423 . 85

(8) Other Distributions

\$ _____, _____, 0 . _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 14, 015 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 6, 752 . 02

(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) David W. Fieselmen
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X David W. Fieselmen
 Signature

(Type name) Victor N. Rios
 Candidate Chairperson (only for PC and PTY)

X Victor N. Rios
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Victor Rios Campaign (2) I.D. Number _____

(3) Cover Period 09/29/18 through 10/05/18 (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		Type	Occupation	Type	Description		Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Victor Rios Campaign

(2) I.D. Number _____

(3) Cover Period 09/29/18 through 10/05/18

(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
10/01/18 #1	Mail Direct Services P.O. Box 11245 Naples, FL 34101	Mailing of campaign brochures	ECC		1423. ⁸⁵
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