

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Erik Carl Brechnitz
 Name
 (2) 5000 Royal Marco Way #931
 Address (number and street)
Marco Island, FL 34145
 City, State, Zip Code

OFFICE USE ONLY
RECEIVED
AUG 07 2018
 CITY OF MARCO ISLAND

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Marco Island City Council
 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 07 / 28 / 2018 To 08 / 03 / 2018 Report Type: 2018 P5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____
 Loans \$ _____ , _____ , _____ . _____
 Total Monetary \$ _____ , _____ , 0 . 00
 In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 372 . 30
 Transfers to Office Account \$ _____ , _____ , _____ . _____
 Total Monetary \$ _____ , _____ , 372 . 30

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 41 , 500 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 23 , 189 . 54

(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) Nancy Brechnitz
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Nancy Brechnitz
 Signature

(Type name) Erik Brechnitz
 Candidate Chairperson (only for PC and PTY)

X Erik Brechnitz
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Erik Carl Brechnitz

(2) I.D. Number _____

(3) Cover Period 07 / 28 / 2018 through 08 / 03 / 2018

(4) Page ⁰¹ of ⁰¹

(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					
07 / 28 / 18	City of Marco Island 50 Bald Eagle Drive Marco Island, FL 34145	Filing fee	Can		72.30
1					
07 / 30 / 18	Christmas Island Style P.O. Box 1216 Marco Island, FL 34146	Contribution/ Sponsorship	Can		300.00
2					
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