

## CAMPAIGN TREASURER'S REPORT SUMMARY



(1) Gerald Robert Swiacki Campaign  
 Name \_\_\_\_\_  
 (2) 667 Thrush Ct.  
 Address (number and street) \_\_\_\_\_  
Marco Island, FL 34145  
 City, State, Zip Code \_\_\_\_\_

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: City Councilman
- 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 8/24/18 To 8/31/18 Report Type: G1

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_, \_\_\_\_\_, 225.00

Loans \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 225.00

In-Kind \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, 630.06

Transfers to Office Account \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 630.06

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 4, 575.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 3, 149.62

### (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) JOHN COFF  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X John Coff  
 Signature

(Type name) GERALD SWIACKI  
 Candidate  Chairperson (only for PC and PTY)

X Gerald Swiacki  
 Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name GERALD ROBERT SWIACKI (2) I.D. Number \_\_\_\_\_

(3) Cover Period 8/24/18 through 8/31/18 (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
8/27/18	LARRY SACHER 1191 LUDLAM CT. MARCO ISLAND, FL 34145	I	RET	CHE			100.00
1							
8/27/18	BARBARA DASTI 1337 FREEDOM AVE MARCO ISLAND, FL 34145	I	RET	CHE			25.00
2							
8/27/18	FRANK KULP 51 PRIMROSE CT MARCO ISLAND, FL 34145	I	RET	CHE			100.00
3							
1							
1							
1							
1							

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name GERALD ROBERT SUIVACIKI

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 8/24/18 through 8/31/18

(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
(6) Sequence Number					
8/31/18	PROFRINT OF NAPLES 2321 DAVIS BLVD, NAPLES, FL 34104	PRINT RACK CARDS	CAN		630.06
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