

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jim Richards  
Name

(2) P.O. Box 1336  
Address (number and street)  
MARCO IS, FL 34146  
City, State, Zip Code

OFFICE USE ONLY

RECEIVED

OCT 16 2018

CITY OF MARCO ISLAND

Check here if address has changed

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

(4) Check appropriate box(es):

- Candidate    Office Sought: City Council
- 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 10/6/18 To 10/12/18 Report Type: 2018GS

Original       Amendment       Special Election Report

#### (6) Contributions This Report

Cash & Checks      \$ \_\_\_\_\_, \_\_\_\_\_, 275 -

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

Total Monetary      \$ \_\_\_\_\_, 275 -

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

#### (7) Expenditures This Report

Monetary Expenditures      \$ \_\_\_\_\_, 1,275 -

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

Total Monetary      \$ \_\_\_\_\_, 1,275 -

#### (8) Other Distributions

\$ \_\_\_\_\_, 15,210.40 <sup>AP</sup>

#### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 21,800 -

#### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 15,210.40

### (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) Alisha Pacheco  
 Individual (only for IE or electioneering comm.)     Treasurer     Deputy Treasurer

X [Signature]  
Signature

(Type name) Jim Richards  
 Candidate     Chairperson (only for PC and PTY)

X [Signature]  
Signature

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

(1) Name Jim Richards (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10/6/18 through 10/12/18 (4) Page 1 of \_\_\_\_\_

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type Occupation |                      | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|-------------|--|---------------------------------------|----------------------|-----------------------------|--------------------------------|-------------------|----------------|
| 10/9/18     | Deborah Krdly<br>1860 Watson Rd<br>Harris, TX<br>77045   | I                                     |                      | CHE                         |                                |                   | 25-            |
| 10/10/18    | Howard Reed<br>125 Park Eagle Dr<br>Harris, TX<br>77045  | I                                     | Ret.<br>City Council | CHE                         |                                |                   | 250-           |
|             |  |                                       |                      |                             |                                |                   |                |
|             |  |                                       |                      |                             |                                |                   |                |
|             |  |                                       |                      |                             |                                |                   |                |
|             |  |                                       |                      |                             |                                |                   |                |
|             |  |                                       |                      |                             |                                |                   |                |
|             |  |                                       |                      |                             |                                |                   |                |
|             |  |                                       |                      |                             |                                |                   |                |

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

(1) Name Jim Richards

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

(3) Cover Period 10, 6, 18 through 10, 12, 18

(4) Page 1 of \_\_\_\_\_

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|-------------|--|--|----------------------------|-------------------|----------------|
| 10/8/18     | Coastal Breeze<br>1857 San Marco St. Okla<br>Moro Is, FL 34145                                 | Advert.  | MON                        |                   | 275-           |
| 10/9/18     | James F Richards<br>15541 Conococt ct<br>Moro Is, FL 34145                                     | MIFD<br>Sponsorship  | RMB                        |                   | 1000-          |
| 11          |  |  |                            |                   |                |
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| 11          |  |  |                            |                   |                |