CAMPAIGN TREASURER'S REPORT SUMMARY						
11) Citiza E 1 Aull 100						
Name Name	OFFICE USE ONLY					
(2) 40 Box 231	Received					
Address (number and street)	OCT 2 6 2022					
Marco 15 FL 34/44 City, State, Zip Code	Office of the City Clerk City of Marco Island, Florida					
	Only of Iwardo Island, Flonda					
Check here if address has changed (4) Check appropriate how/sex	(3) ID Number:					
The appropriate DOX(68).						
☐ Candidate Office Sought: ☐ Political Committee (PC)						
Li Electioneering Communications Org. (ECO)	Chark have is BC on FOO have					
Li Faity Executive Committee (PTV)	☐ Check here if PC or ECO has disbanded ☐ 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					
Cover Period: From /2 / 8 / 3 a	rt Identifiers					
7 0 22 10	10 1 21 1 22 Report Type: 65					
☐ Amendment ☐ Sp	pecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
	Monetary					
Cash & Checks \$, , 100.00	Expenditures \$,					
	!					
Loans \$,	Transfers to Office Account \$					
Total Monetary \$, , /eo . 60	Office Account \$					
	Total Monetary \$ 194/ 05					
In-Kind \$,, _ 	Total Monetary \$					
	(8) Other Distributions					
	\$					
(9) TOTAL Monetary Contributions To Date						
\$						
	\$, 39.869 .9)					
It is a first degree misdemonant (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) ∠/nDA GOSLEE (Type name) CHRISTINE DOWELL						
□ Individual (only for IE or electioneering comm.) □ Treasurer □ Deputy Treasurer □ Candidate □ Chairperson (only for PC and PTY)						
Signature	* Christine Dorocll					
DS-DE 12 (Rev. 11/13)						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Tizens FOR A	BETTER MO	URCO (2)	I.D. Number	K	
(3) Cover Period	10 1 8 122	through /o /	21 122	_ (4) Page		of/_
(5) Date	(7)	(8)	(9)	(10)	(11)	(12)

(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	C	(8)	(9)	(10)	(11)	(12)
Number	City, State, Zip Code	1	•	Type	In-kind Description	Amendment	A
10,17,22	NICOle Ginic				- 55511741511	, attending it	Amount
	1278 drangect		n ,				
/	Nicole Ginic 1278 Orange Ct. Marco 15, FL 34145	Z	Ret.	CHK			160.00
1 1							
1 1							
1 1							
1 1							
1 1							
DS-DE 13 (Rev. 11/13)					ID CODE VALUE		

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Citizens (1) C.A. Ballon (2) 100

(1) Name C1712ens For A Better	marco	(2) I.D. Number	
(3) Cover Period 10 / 8 / 22 through	1 21 , 22	(4) Page /	,

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
/	US Postal Service 600 E Elkham Circle Marco Is. FL 34145	PO BOX	MON		83.00
	City of Marco Island 50 Bald Lagle Deive Marco 15, FL 34145	Room Rental	moN		95.85
10/11/22 3	Freedom Voice 5600 Avenita Encinas #170 Carlshad, CA 92008	Phone	mon		16.07
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