CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Michelle L. McLeod	OFFICE USE ONLY						
(.,	Name	RECEIVED						
(2)	728 Old Trail Drive	IAN 4.7 2020						
	Address (number and street) Naples, FL 34103	JAN 1 7 2020						
	City, State, Zip Code	CITY OF NAPLES CITY CLERK						
	Check here if address has changed	(3) ID Number:						
(4)	Check appropriate box(es):	,						
	✓ Candidate Office Sought: ☐ 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								
Cov	er Period: From 01 / 01 / 2020 To	01 / 10 /2020 Report Type:						
	Original Amendment Spe	cial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cas	h & Checks \$, , 600. 00	Monetary Expenditures \$, _2 , 105 . 58						
Loans \$, ,		Transfers to Office Account \$, , .						
Tota	al Monetary \$, 600. 00	Total Monetary \$, 2 ,105 .58						
In-K	Sind \$, ,							
5.4.00.20		(8) Other Distributions						
		\$, ,						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
, ,	\$,9 , _750 00	\$, 4 , _742 . 17						
	(11) Cer	tification						
١.	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) Stephanie J. Feldman Individual (only for IE Treasurer Deputy Treasurer	(Type name) Michelle L. McLeod ☑ Candidate ☐ Chairperson (only for PC and PTY)						
6	Individual (only for IE	100000000000000000000000000000000000000						
2	Stolair Meldnan	X Signature						
1	Signaturle V	oigitaturo -						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Miche	lle L. McLeod		(2)	I.D. Number		
(3) Cover Period	01 / 01 / 2020	through/	10 / 2020	(4) Page	<u> </u>	of
(5) Date (6) Sequence Number	(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
01 07 2020 _ / /	Lenhard, Michael 800 17th ave South Naples, FL 34102	I Retired	Che			\$500.00
01	Fontana, Joseph 267 15th Ave S Naples, FL 34102	I Retired	Che			\$100.00
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Michelle L. McLeod (2) I.D. Number								
(3) Cover Perio	d 01 /01 /2020 through 01	<u>/ 10 / 2020</u> (4	1) Page1	of _	L			
(5) Date (6) Sequence Number	(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)	(11)			
01 / 08/ 20	Paypal 2211 North First Street San Jose, CA 95131	Service fee for contributions made	CAN		\$ 3.20			
2	City of Naples 735 8th Street South Naples, FL 34102	Filing Fee	CAN		\$ 461.00			
01 / 10 / 20	Prestige Printing 10940 Harmony Park Dr Bonita Springs, FL 34135	Advertising & Promotion	CAN		\$ 1,641.38			
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