

1982716 02 JUL 20 9:25AM

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Chauncey Solinger
Name

(2) 4856 Palm Beach Blvd
Address (number and street)

Fort Myers FL 33905
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es): council ward 4

Candidate Office Sought: _____

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 07/18/2020 / _____ To 07/24/2020 / _____ Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ 0 , _____ , _____ . _____

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ 6.105.23 , _____ , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ 5995.69 , _____ , _____ . _____

(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:

Chauncey Solinger
(Type name)

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

Chauncey Solinger
(Type name)

Candidate Chairperson (only for PC and PTY)

X
Signature

X
Signature