

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

(1) Jacquelyn D. McMiller

Name

(2) 2301 Dupree St.

Address (number and street)

Fort Myers, FL 33916

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City of Fort Myers Mayor

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 / 25 / 20 To 07 / 31 / 20 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 696 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 696 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 3 , 193 . 23

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

Total Monetary \$ _____ , 3 , 193 . 23

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 14 , 893 . 37

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 12 , 339 . 57

(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) Lulla B. McMiller

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

X Lulla B. McMiller
Signature

(Type name) Jacquelyn D. McMiller

Candidate Chairperson (only for PC and PTY)

X Jacquelyn D. McMiller
Signature