

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

(1) Name Liston Bochette III (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10/17/20 through 10/29/20 (4) Page 1 of 1

(5) Date	(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
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
10, 20, 20	WILL PRATHER 1380 COLONIAL BL FT MYERS, FL 33907	I		CAS	-	-	500.-
113							
10, 20, 20	MARGIE WILLIS 1416 SANDRA DR FT MYERS, FL 33901	I		CAS	-	-	50.-
114							
10, 21, 20	LONNIE HOWARD 2122 JOHNSON ST FT MYERS, FL 33901	I		CAS			500.-
115							