

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CCPFFPC

Name

(2) 407 SW 2ND TER

Address (number and street)

CAPE CORAL, FL 33991

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY  
RECEIVED

OCT 8 2019

CITY OF CAPE CORAL  
CITY CLERKS OFFICE

(3) ID Number: 2019 - M9

(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

Cover Period: From 9 / 1 / 19 To 9 / 30 / 19 Report Type: M9

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 746 . 48

Loans \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

In-Kind \$        ,        ,        .       

### (7) Expenditures This Report

Monetary Expenditures \$        ,        ,        .       

Transfers to Office Account \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

### (8) Other Distributions

\$        ,        ,        .       

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 36,653 . 44

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 351 . 62

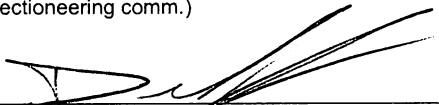
### (11) Certification

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:

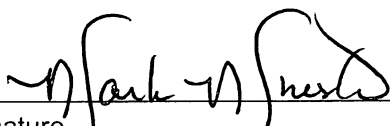
(Type name) DAVE ARNOLD

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

X   
Signature

(Type name) MARK MUERTH

Candidate  Chairperson (only for PC and PTY)

X   
Signature

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CITY OF CAPE CORAL  
CITY CLERKS OFFICE

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

(1) Name CCPFFPC (2) I.D. Number 2019-M9

(3) Cover Period 9 / 1 / 19 through 9 / 30 / 19 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
9 / 20 / 19	CCPFF 407 SW 2nd Ter Cape Coral FL 33991	B	LABOR Union	CHE			746 <sup>48</sup>
M9-1							
/ /							
/ /							
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