

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

Due Feb. 01 2010

(1) Chris N. Chulakes-Leetz
Name

(2) 3733 SE 8th Pl
Address (number and street)

Cape Coral FL 33904
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Cape Coral City Council District 4

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 30 / 2009 To 11 / 30 / 2009 Report Type FR3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ _____

Total Monetary \$ None

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 588.29

Transfers to Office Account \$ 0

Total Monetary \$ 588.29

(8) Other Distributions \$ 0

(9) TOTAL Monetary Contributions To Date
\$ 3796.38

(10) TOTAL Monetary Expenditures To Date
\$ 3796.38

(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.

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(Type name) Chris Chulakes-Leetz

(Type name) Chris Chulakes-Leetz

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Chris Chulakes-Leetz
Signature

X Chris Chulakes-Leetz
Signature

FR3

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Chris Chafakes-Leetz (2) I.D. Number _____

(3) Cover Period 10 / 30 / 2009 through 11 / 30 / 2009 (4) Page _____ of _____

(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		
/ /	<i>None</i>						
/ /							
/ /							
/ /							
/ /							
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/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Chris Chulakes - Leetz (2) I.D. Number _____
 (3) Cover Period 10, 30, 09 through 11, 30, 2009 (4) Page 1 of 1

(5) Date	(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) Amendment	(11) Amount
(6) Sequence Number					
11/2/09	Publix Cape Coral Pkwy + Santa Barbara Cape Coral FL 33914	Bev + Food Campaign/Workers Phoners	MON		35. ⁰²
1					
11/3/09	Amer. Telephone PO Box 6463 Carol Stream IL 60197	Phone Banking Bal	MON		196. ²⁷
2					
11/4/09	Chris Chulakes Leetz 3233 SE 8th Pl Cape Coral FL 33904	Loans Retund	Ret		357. ⁰⁰
3					
11/24/09	Guardian Angels For Special Populations	Donation of Remaining Campaign Funds	DIS		18. ³¹
4					
1/1					
1/1					
1/1					
1/1					