

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

(1) Valerie Guenther
Name

(2) PO Box 284
Address (number and street)

Placida, FL 33946
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(4) **Check appropriate box(es):**

Candidate (office sought): County Commissioner District 3

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

OFFICE USE ONLY

ONLINE SUBMISSION
[1053069]

Submitted on:
2/7/2013 09:38:54 (eastern)

(3) **ID Number:** 301

(5) REPORT IDENTIFIERS

Cover Period: From 1/1/2012 To 3/31/2012 Report Type Q1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>-101.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>-101.00</u>
In-Kind	\$	<u>11.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 25,076.11

(10) TOTAL Monetary Expenditures To Date
\$ 16,036.61

(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) _____

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) _____

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

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Valerie Guenther **(2) I.D. Number** 301
(3) Cover Period 1/1/2012 through 3/31/2012 **(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				
3/21/2012 / /	Price, Karen 15546 Viscount Circle Port Charlotte, FL 33981	I		CH		Delete	\$100.00
1							
3/21/2012 / /	Price, Karen 15546 Viscount Circle Port Charlotte, FL 33981	I		CH		Add	\$10.00
2							
3/31/2012 / /	Anarumo, Paul 2356 Tamarind St. Port Charlotte, Fl 33948	I		CA		Delete	\$11.00
3							
3/31/2012 / /	Anarumo, Paul 2356 Tamarind St. Port Charlotte, Fl 33948	I		IK	contribution to event expense	Add	\$11.00
4							
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Valerie Guenther

(2) I.D. Number 301

(3) Cover Period 1/1/2012 through 3/31/2012

(4) Page 1 of 0

(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					
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