CAMPAIG	N TREASURER	'S REPC	RT SUMMA	ARY					
Yes Conservation Collie				OFFICE USE ONLY ONLINE SUBMISSION					
(2) 1020 8TH Ave South #6				[1199268]					
Address (number and street)			Submitted on	:					
Naples, FL 34102			2/7/2020 15:	14:52 (eastern)					
City, State, Zip Code									
Check here if address has c	hanged	(3)	ID Number:	544					
(4) Check appropriate box(es):									
☐ Candidate Office Sought:									
☑ Political Committee (PC)									
☐ Electioneering Communication			e if PC or ECO has disb						
<ul><li>☐ Party Executive Committee (P</li><li>☐ Independent Expenditure (IE) (</li></ul>				panded or EC reports will be filed					
individual making electioneering c		Oncon	II IIO Ottio. II I	I LO IOPOILO WIII DO III DA					
	(5) Report Id	dentifiers							
Cover Period: From 1 / 1			/2020	Report Type: M1					
☐ Original ☐ Amendment	☐ Specia	al Election R	eport						
(6) Contributions This Report	(	(7) Expe	enditures This	Report					
Cash & Checks \$ ,	1	Monetary Expenditure	s \$	, <u> </u>					
Loans \$ ,		Transfers to Office Acco		, , 0 . 00					
		Total Monet		, , 0 . 00					
In-Kind \$ ,	, 0.00								
	(3		er Distributions						
		\$ <u>_</u>		,000					
(9) TOTAL Monetary Contributio	ns To Date (	10) TOT	AL Monetary E	Expenditures To Date					
\$,,, 100 .		\$	_	, 0. 00					
It is a first degree misden	(11) Certifi neanor for any person		public record (s	ss. 839.13, F.S.)					
I certify that I have examined this repo	ort and it is true, correc	t, and compl	ete:	-					
(Type name)		(Type name	e)						
☐ Individual (only for IE ☐ Treasurer or electioneering comm.)	☐ Deputy Treasurer	☐ Candidate	·	nairperson (only for PC and PTY)					
X		X							
Signature		Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Yes Conservation C	ollie	r pac		2) I.D. Numbe	er	344
	1/1/2020		1	/31/2020			
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	je <u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C <sub>i</sub>	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
1/13/2020	Grant, Richard and Marjory 158 Caribbean Road Naples, FL 34108		attorney	СН	Воссирания		\$100.0
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1 1							
j j							
1 1							
f I							
					-		
1 1							
1 1							

(1) Name Yes		(2	EXPENDIT 2) I.D. Number		544					
1/1/2020 1/31/2020 (3) Cover Period / / / through / / (4) Page 1 of 0										
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)					
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount					
//										
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