'08JUN19#1035 50E Lee Co F1

ann

Lee SOE Form 08-2007

# LEE COUNTY V SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	MARGARET FINEBERG
Residence Address	12437 PEBBLESTONE COURT
City and Zip Code	FORT MYERS, FL 33913
Mailing Address (if different)	Check if same as above. P.O. BOX 60274 FORT MYERS, FL 33906
Telephone Number(s) (Daytime)	(239) 810-4136
Email Address	Harfinegateway@comcast.Net
Office Sought	Gatenay CDD
Area, District, Group Or Seat Number	Scat3
Political Party (If Applicable)	
Date Of Birth Or Voter ID #	OCT. 19, 1958
Date	6-19-08
Candidate Signature	X Marguet Fineberg

All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.

Candidates who provide an email address <u>may be</u> contacted by this office, via the email address provided by the candidate, for campaign related communications that pertain exclusively to the candidate's campaign.

All other mailings from this office, which pertain to every candidate, will be via United States Postal Service.



# \*08JUN19#1035 SOE Lee Co F1

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE TYPE)			OFF	ICE USE OI	NLY
(PLEASE	E TYPE)				
CHECK APPROPRIATE BOX:					
Original Appointment	Deputy Treasurer	Reappo	intment of Treasu	urer	Secondary Depository
Name of Candidate	NEBERG	P.0	(include post offic BOX 60 T. MYERS	274	et, city, state, zip code) 3 <i>3906</i>
Telephone (optional)         2. F           (239) 810 - 4136         -4136	Party (Partisan candidates on	ly)		district, circuit,	group number)
I have appointed the following pe	erson to act as my	npaign Treas	surer	Deputy Treas	urer
4. Name of Treasurer or Deputy MARGARET F					
5. Mailing Address (If post office P.O. Box 60	box or drawer add street addre	ss)	<u></u>	6. Telepilor	ne 0-4136
	8. County LEE	9. State	· · · · · · · · · · · · · · · · · · ·	10. Zi	p Code 3 906
I have designated the following n	amed bank as my 🛛 🕅 Prir	nary Deposit	ory 🗌 Sec	condary Depos	sitory
11. Name of Bank	2		t Address	BLU	
LACHOVIA L	14. County	576	<u>5 688</u> 15. State		6. Zip Code
LEHIGH ACRES	LEE		FL		33971
17. Signature of Candidate	& Fineberg	7		Date	6/19/08
Ca	mpaign Treasurer's A	cceptan	ce of Appoir	ntment	
1MARGARET	- FINEBERG (Please Print or Type)			, do hereby a	ccept the appointment as
Campaign Treasurer	Deputy Treasurer for the	campaign o	1 MARGA	RET F	TILEBERG .
who is seeking nomination or elec	ction as a	Ne	N	Ca	andidate to the office of
Catenny CDI	)- Seat 3. sadu	(Party y registered	voter in	Lee_	-
County, Florida, I am qualified to	accept this appointment.				
	ERJURY, I DECLARE THAT I ANCE OF APPOINTMENT AN				
6/19/	108 X1	W	gailt	Fire	berg
Date		Signature	of Campaign Tre	asurer or Dep	outy Treasure)
DS-DE 9 (Rev. 02/06)					



STATEMENT OF CANDIDATE (Section 106.023, F.S.) (Please Type)	OFFICE USE ONLY
I, <u>MARGARET</u> FINE candidate for the office of <u>Gake</u> have received, read and understand th	5
Florida Statutes.	
X Magaet Fineberg Signature of Candidate	<u> </u>
failure to file this form is a first degree misde	he qualifying officer within 10 days after the gnation of Campaign Depository is filed. Willful meanor and a civil violation of the Campaign o \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida

1303 #7 305 920 TWO TN/ 1030.



# AFFIDAVIT OF INTENT LEE COUNTY SPECIAL DISTRICT CANDIDATE

State of Florida County of Lee

1. MARGARET FINEBERG	_, am a candidate for the Special District
(print name)	

office of: <u>Akway</u> <u>CDD</u> - district name and district #,

in the <u><u>l-04-08</u> election</u>. I understand that my only campaign (date of election)

expense, from personal funds, shall be the \$25 candidate-qualifying-fee or the signature verification fee for candidates who qualify by submitting 25 valid candidate petition signatures.

As long as these are my only campaign expenses, <u>I will not be required to</u>: appoint a campaign treasurer, designate a campaign depository or file periodic campaign treasurer's reports as required by Florida Statutes §99.061 or §106.07 and, therefore, during my campaign, I am prohibited from expending, collecting, soliciting or accepting any money or contribution(s) in-kind, in connection with my campaign.

In the event I later decide to, collect, solicit, or accept any money or contribution(s) in-kind, or make any campaign expense, <u>prior to doing so</u>, I understand that <u>I AM REQUIRED TO FIRST FILE</u> Form DS-DE 9 (Appointment of Campaign Treasurer/Designation of Campaign Depository Form) with the Lee County Supervisor of Elections. My campaign shall then be subject to campaign finance regulations in accordance with Florida Statutes, Chapter 106 and I will be required to file periodic campaign treasurer's reports as required by Florida Statute §106.07 with the Lee County Supervisor of Elections.

ignature of Candidate

FS 106.021(1)(a) "No person shall accept any contribution or make any expenditure with a view to bringing about his or her nomination, election, or retention in public office, or authorize another to accept such contributions or make such expenditure on the person's behalf, unless such person has appointed a campaign treasurer and designated a primary campaign depository."

History 2007 HB537, FS 99.061, FS Chapter 106.021 Revised-3/6/2008 Lee County Special District Forms



108 JUN1901 1055 SELUSE ONEY LOYALTY OATH FOR **NON-PARTISAN OFFICE** (Sections 876.05-876.10, Fiorida Statutes) STATE OF FLORIDA Lee .county FINEBERG NARGARET I, Middle Name/Initial a citizen of the State of Florida and of the United States of America, ... and a candidate for public office ... do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida. **OATH OF CANDIDATE** (Section 99.021, Florida Statutes) (PLEASE PRINT NAME AS YOU WISH IT TO BE WRITTEN IN ON THE BALLOT - NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING) I, am a candidate for the office of (sateway (office) (district) (group) 12437 PEBBLESTONE CT. My legal residence is County, Florida. I am gualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected. have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012. Florida Statutes. Hatinegateway @ comcast. Net X (239) 810-4136 unature of Candidate **Daytime Telephone Number** Email Address 60274 FORT MYERS 33906 Address Citv State ZID•Code 19th Sworn to (or affirmed) and subscribed before me this day o Personally Known: Produced Identification: Signature of Notary Public - State of Florida Type of Identification Produced: Print, Type or Stamp Commissioned Name of Notary Public 577-58-879-0 Bernice Ramos Feliciano Commission # DD589927 Expires October 19, 2010 130301305 SEOT MUGTNING 1 DS-DE 25 (02/08)

FORM 1	STATEM	IENT OF	2007
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	L INTERESTS	5
LAST NAME FIRST NAME MIDDLE	NAME: GARET - STASTR		-
P.O. Box 60	274		
			ID Code
CITY : FORT MYERS. NAME OF AGENCY :	ZIP: COUNTY: FL 33906	LEE	ID Code
			Conf. Code
			P. Req. Code
You are not limited to the space on the lines CHECK ONLY IF X CANDIDATE		· -	
A FISCAL YEAR. PLEASE STATE BELON DECEMBER 31, 2007 MANNER OF CALCULATING REPORTAL THE LEGISLATURE ALLOWS FILERS	WHETHER THIS STATEMENT IS <u>OR</u> SPECIFY BLE INTERESTS: THE OPTION OF USING REPOR R USING COMPARATIVE THRESH TATE BELOW WHETHER THIS ST	RECEDING TAX YEAR, WHETH FOR THE PRECEDING TAX Y TAX YEAR IF OTHER THAN T RTING THRESHOLDS THAT A HOLDS, WHICH ARE USUALL ATEMENT REFLECTS EITHER	IER BASED ON A CALENDAR YEAR OR ON EAR ENDING EITHER (check one): HE CALENDAR YEAR: RE ABSOLUTE DOLLAR VALUES, WHICH Y BASED ON PERCENTAGE VALUES (see
PART A PRIMARY SOURCES OF INC		he reporting person] IRCE'S	DESCRIPTION OF THE SOURCE'S
OF INCOME CITY OF MYERS	ADC	DRESS	PRINCIPAL BUSINESS ACTIVITY
CIT OF TITLERO	2200 5800		🖉 WARD 6 LEGISLATIVE ASST
PART B SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, bui			FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.
HOUSE - 9835 BLU	E STONE CIR - F	FORT MYERS, FL	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
			OTHER FORMS you may need to file are decrimented to
CE FORM 1 - Eff. 1/2008	(Continued or	n reverse side)	PAGE 1

PART D — INTANGIBLE PERSON TYPE OF INTANGIB	IAL PROPERTY [Stock	s, bonds, certificate	es of deposit, etc.] BUSINESS ENTITY TO WHIC	
NIA			BUSINESS ENTITY TO WHIC	
<u>'///</u>				
		<u></u>		······································
····· ,		<u></u>	·	
				······································
PART E — LIABILITIES [Major de NAME OF CREDI			ADDRESS O	FCREDITOR
NA				
<u> </u>		······································		
PART F - INTERESTS IN SPECIF	IED BUSINESSES [Ow	vnership or position	s in certain types of businesses]	
	BUSINESS ENT	TY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY				
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			····	
NATURE OF MY OWNERSHIP INTEREST				
IF ANY OF PARTS A	THROUGH F ARE		ON A SEPARATE SHEE	T, PLEASE CHECK HERE
SIGNATURE (required):	ragiost	Firebe	DATE SIG	iNED (required): 16 - 19 - 08
/ L		LING INS	PRUCTIONS:	
	14/1			

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

if you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

### NOTE:

### **MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Blvd. South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

## WHEN IU FILE

initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

FLORIDA DEPARTMENT OF ST CAMPAIGN TREASURE	ATE DIVISION OF ELECTIONS R'S REPORT SUMMARY				
<ul> <li>(1) <u>MARGARET FINEBERG</u></li> <li>Name</li> <li>(2) P O BOX 60274, FORT MYERS, FL 33906</li> <li>Address (number and street)</li> <li>City, State, Zip Code</li> </ul>	REPORT				
<ul> <li>CHECK IF ADDRESS HAS CHANGED</li> <li>(4) Check appropriate box(es):</li> </ul>	(3) ID Number:				
Candidate (office sought): GATEWAY CDD-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				
(5) REPORT Cover Period: From 10/31/2008	IDENTIFIERS 2/2/2009 / Report Type <sup>TR-4</sup>				
☑ Original     ☐ Amendment     ☐ Special Election					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
Cash & Checks \$0.00	Monetary Expenditures \$ 56.96				
Loans \$	Transfers to Office Account \$ 0.00				
Total Monetary \$0.00	Total Monetary \$ 56.96				
In-Kind \$	(8) Other Distributions				
	\$				
(9) TOTAL Monetary Contributions To Date \$1,100_00_	(10) TOTAL Monetary Expenditures To Date				
(11) CERTIFICATION					
I certify that I have examined this report and it is true, correct, and complete. (Type name) MARGARET FINEREG individual (only for electioneering commun.) Treasurer Deputy Treasurer electioneering commun.)	on 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)       MARGARET         FINEBERG         Candidate       Chairperson (only for PC, PTY & electioneering commun. organization)         X       Magazet Fineberg				
Signature	Signature				

1303 001 HOLD TEED WOEN HIGO.

Name	MARGARET FINEBERG				2) I.D. Number	r	97
	10/31/2008		2	/2/2009			•
Cover Perio	od / /	thre	pugh	!!	(4) Page	≩ <u> </u>	of
(5) Date (6)	(7) Full Name		(8)	(9)	(10)	(11)	(12)
quence	Street Address &			Contribution	In-kind		-
umber	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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	Cover Periv	10/31/2008         Cover Period       /       /         (5)       (7)         Date       (Last, Suffix, First, Middle)         Street Address &       City, State, Zip Code         /       /         /       /         /       /         /       /         /       /         /       /         /       /         /       /         /       /         /       /         /       /         /       /         /       /         /       /	10/31/2008         Cover Period       /       /       through the set of the set	10/31/2008       2         Cover Period       /       /       through          (5)       (7)       (8)       (9)         Cate       (Last, Suffix, First, Middle)       Contributor       Contributor         (6)       (Last, Suffix, First, Middle)       Contributor       Contributor	10/31/2008       2/2/2009         Cover Period       /       /         /       /       /         /ate       Full Name       (6)       (9)         (ate, Suffix, First, Middle)       Street Address &       Contributor       Contributor         //       City, State, Zip Code       Type       Occupation       Type         //       /       /       /       ////////////////////////////////////	10/31/2008       2/2/2009         Cover Period       /       /       /       (4) Page         (6)       (7)       (8)       (9)       (10)         Date       (Last, Suffix, First, Middle)       Contributor       Contributor       Contributor         (7)       (9)       (9)       (10)       In-kind         Unneer       City, State, Zip Code       Type       Cocupation       Type         /       /          Description         /       /           Description         /                 /	10/31/2008       2/2/2009         (4) Page       1         (5)       (7)       (8)       (9)         (10)       (11)       (11)         (2)       Street Address &       Contributor       Contributor         (6)       (10)       (11)       In-kind         (9)       (2)       (2)       (9)       (10)         (11)       Street Address &       Contributor       Contributor       Contributor         (11)       Type       Cocupation       Type       Contributor         (11)       In-kind       Description       Amendment         (11)       In-kind       In-kind       Description       In-kind         (11)       In-kind       In-kind       In-kind       In-kind       In-kind         (11)       In-kind       In-kind       In-kind       In-kind       In-kind       In-kind         (11)       In-kind       In-kind       In-kind       In-kind       In-

DS-DE 13 (Rev. 08/03)

(1) Name_MARG	CAMPAIGN TREASU		(2	EXPENDIT 2) I.D. Number		97
(3) Cover Period	10/31/2008	2/2/2009		l) Page <u>1</u>	of	1
		/ugii	· (~	// uge		
(5) Date	(7) Full Name (Last, Suffix, First, M	iddio) fodd	(8) Purpose office sought if	(9)	(10)	(11)
(6) Sequence Number	City, State, Zip Co	s con	tribution to a candidate)	Expenditure Type	Amendment	Amount
	FINEBERG, MARGARET P O BOX 60274 FORT MYERS, FL 33906		ourse idate	DI		\$56.96
11						
11						
11						
11						
	аний————————————————————————————————————					

FLORIDA DEPARTMENT OF S CAMPAIGN TREASUR	TATE DIVISION OF ELECTIONS ER'S REPORT SUMMARY /
(1) MARGARET FINEBERG	OFFICE USE ONLY 97
Name	31
(2) P O BOX 60274, FORT MYERS, FL 33906	
Address (number and street)	——
City, State, Zip Code	
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:
(4) Check appropriate box(es):	31
X Candidate (office sought): GATEWAY CDD-3	은 문 문 HAS DISBANDED 영
Political Committee	
Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED
Party Executive Committee	
Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING
(5) REPOR	I IDENTIFIERS
Cover Period: From / / To	10/30/2008
· ·	
X Original Amendment Special Election	on Report Independent Expenditure Report
6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT
•	Monetary
Cash & Checks \$355.00	Expenditures \$ 588.01
oans \$ 0.00	
.oans \$0.00	Transfers to Office
	Account \$0.00
Solution   Solution     Solution   Solution	Total
	Monetary \$ 588.01
n-Kind \$19.18	
	(8) Other Distributions
	\$0.00
9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$1,100_00	
	<b>a</b> 1,043.04_
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	son to faisify a public record (ss. 839,13, F.S.)
It is a first degree misdemeanor for any per	
certify that I have examined this report and it is true,	I certify that I have examined this report and it is true, correct, and complete.
certify that I have examined this report and it is true, correct, and complete. (Type name) MARGARET FINEBERG	I certify that I have examined this report and it is true,
certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete. (Type name) MARGARET FINEBERG Candidate Chairperson (only for PC, PTY &
certify that I have examined this report and it is true, correct, and complete. (Type name) MARGARET FINEBERG Individual (only for Treasurer Deputy Treasurer	I certify that I have examined this report and it is true, correct, and complete. (Type name) MARGARET FINEBERG
certify that I have examined this report and it is true, correct, and complete. (Type name) MARGARET FINEBERG Individual (only for Treasurer Deputy Treasurer	I certify that I have examined this report and it is true, correct, and complete. (Type name) MACARET FINEBERG Candidate Chairperson (only for PC, PTY &

(1) Name	MARGARET FINEBERG				(2) I.D. Number		
	10/11/2008		1	0/30/2008			
(3) Cover Pe	riod / /	thr	ough	11	(4) Page	1	of 1
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	1		Contribution	In-kind	Amendment	A
Number	City, State, Zip Code Rittenberg, Gloria	Туре	Occupation retired	Туре СН	Description		Amount \$50.0
10/17/2008 / /	Fort Myers, FL 33913		recifed				\$50.0
10/17/2008 / /	Friedrichs, L G 9640 Blue Stone Circle Fort Myers, FL 33913	I	retired	СН			\$50.0
2							
10/17/2008	Gillam, Darell 10514 Bella Vista Drive Fort Myers, FL 33913	I	retired	СН			\$25.0
3	Martin, F K	I	retired	Сн			\$30.0
10/24/2008 / / 4	Fort Myers, FL 33913	-	recifed				\$30.0
10/24/2008 / /	Hall, Nancy 10511 Bella Vista Drive Fort Myers, FL 33913	I	retired	Сн		<u> </u>	\$200.0
10/30/2008 / /	Fish, Paul 10511 Bella Vista Drive Fort Myers, FL 33913	I	retired	IK	internet services		\$19.1
1 1							<u> </u>

DS-DE 13 (Rev. 08/03)

(1) Name MARG	CAMPAIGN TREASURER'S F		D EXPENDI1 (2) I.D. Numbe		97
(3) Cover Period	10/11/2008 10 / through	/30/2008	(4) Page1	of	3
(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)
(6) Sequence Number	City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount
	Wal-Mart, 6-mile Cypress at Colonial Blvd Fort Myers, FL 33912	campaign party	мо		\$93.78
	Publix, State Road 82 Fort Myers, FL 33913	campaign party	MO		\$18.7
1	Kwik Kopy, 13881 Plantation Road Fort Myers, FL 33912	campaign flyers	МО		\$254.40
	Sign Depot, 1813 Colonial Drive Orlando, FL 32803	capaign banner	мо		\$71.12
	Wal-Mart, 6-mile Cypress at Colonial Blvd Fort Myers, FL 33912	campaign party favors	мо		\$45.50
	Erickson, Barry 12803 Aston Oaks Drive Fort Myers, FL 33912	distribut flyer ion	мо		\$10.00
	Erickson, Chad 12803 Aston Oaks Drive Fort Myers, FL 33912	distribut flyer ion	мо		\$10.00
	Brown, Morgan 11562 Lake Cypress Loop Fort Myers, PL 33913	distribut flyer ion	MO		\$5.00

10/11/2008	10/30/2008	-	97	
d//through	/ (	4) Page 2	of	3
(7) Fuil Name	(8) Purpose	(9)	(10)	(11)
(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
Bonnough, Brian 11446 Waterford Village Drive Fort Myers, FL 33913	distribut flyer ion	МО		\$5.0
Bonnough, Tyler 11446 Waterford Village Drive Fort Myers, FL 33913	distribut flyer ion	МО		\$10.0
Jimenez, Reynaldo 12556 Astor Road Fort Myers, FL 33913	distribut flyer ion	мо		\$10.0
Caldas, Mario 12868 Stone Tower Loop Fort Myers, FL 33913	distribut flyer ion	МО		\$10.0
Stutz, Brittany 12041 Wedge Drive Fort Myers, FL 33913	distribut flyer ion	MO		\$5.0
Blackwelder, Jenna 5221 Beauty Street Lehigh Acres, FL 33971	distribut flyer ion	MO		\$12.5
Arnold, Ryan 23345 Little Gem Circle Fort Myers, FL 33913	distribut flyer ion	мо		\$5.00
Weber, Sarah	distribut	мо		\$5.00
	<pre>d( through</pre>	d       /       through       /       (8)         Full Name (Last, Suffk, First, Middle) Street Address & City, State, Zip Code       Purpose (add office sought if contribution to a candidate)         Bonnough, Brian 11446 Waterford Village Drive Fort Myers, FL 33913       distribut flyer ion         Bonnough, Tyler Port Myers, FL 33913       distribut flyer ion         Jimenez, Reynaldo 12556 Astor Road Fort Myers, FL 33913       distribut flyer ion         Caldas, Mario       distribut flyer ion         Stutz, Brittany 12041 Wedge Drive Fort Myers, FL 33913       distribut flyer ion         Stutz, Brittany 12041 Wedge Drive Fort Myers, FL 33913       distribut flyer ion         Blackwelder, Jenna 521 Beauty Street Lehigh Acres, FL 33913       distribut flyer ion         Arnold, Ryan 23345 Little Gem Circle Fort Myers, FL 33913       distribut flyer ion	d       /       (4) Page       2         (7)       (8)       (9)         Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code       (add office sought if contribution to a candidate)       Expenditure Type         Bonnough, Brian 11446 Waterford Village Drive Fort Myers, FL 33913       distribut flyer ion       MO         Bonnough, Tyler 11446 Waterford Village Drive Fort Myers, FL 33913       distribut flyer ion       MO         Jimenez, Reynaldo 12556 Astor Road Fort Myers, FL 33913       distribut flyer ion       MO         Caldas, Mario 12668 Stone Tower Loop Fort Myers, FL 33913       distribut flyer ion       MO         Stutz, Brittany 12041 Wedge Drive Fort Myers, FL 33913       distribut flyer ion       MO         Blackwelder, Jenna 5221 Beauty Street Lehigh Acres, FL 33971       distribut flyer ion       MO         Arnold, Ryan 23345 Little Gem Circle Fort Myers, FL 33913       distribut flyer ion       MO	d

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name MARGARET FINEBERG (2) I.D. Number 97 10/11/2008 10/30/2008					97
(3) Cover Perio	10/11/2008 1 d/through		4) Page <u>3</u>	of	3
(5) Date (6) Sequence Number	(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
10/27/2008 17	Cobb, Justin 13294 Highland Chase Place Fort Myers, FL 33913	distribut flyer ion	мо		\$3.13
10/27/2008 	Gutierrez, Jessica 4720 Long Lake Drive Fort Myers, FL 33905	distribut flyer ion	МО		\$13.75
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DS-DE 14 (Rev. )	08/03)		,		

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS					
<ul> <li>(1) <u>MARGARET FINEBERG</u></li> <li>Name</li> <li>(2) P O BOX 60274, FORT MYERS, FL 33906</li> <li>Address (number and street)</li> </ul>	OFFICE USE ONLY 97				
City, State, Zip Code CHECK IF ADDRESS HAS CHANGED (4) Check appropriate box(es): Candidate (office sought): GATEWAY CDD-3 Political Committee Committee of Continuous Existence Party Executive Committee Electioneering Communication	(3) ID Number:				
(5) REPORT IDENTIFIERS         Cover Period:       9/27/2008       10/10/2008       Report Type       G3         Image: Special Election Report       Image: Image: Special Election Report       Image: Image: Special Election Report       Image: Special Election Report					
(6) CONTRIBUTIONS THIS REPORT         Cash & Checks       0.00         Loans       \$ 0.00	(7) EXPENDITURES THIS REPORT Monetary Expenditures \$ 0.00 Transfers to Office				
Total Monetary         \$         0.00           In-Kind         \$         130.69	Account         \$         0.00           Total         0.00         0.00				
	(8) Other Distributions \$0.00				
(9) TOTAL Monetary Contributions To Date       (10) TOTAL Monetary Expenditures To Date         \$					
(11) CERTIFICATION					
It is a first degree misdemeanor for any pers         I certify that I have examined this report and it is true, correct, and complete.         (Type name)       MARGARET       FINEBERG         Individual (only for electioneering.commun.)       Treasurer       Deputy Treasurer         X       Margaret       Fineberg         Signature       Signature	icon 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)       Image: Construct the second se				
Signat(ure/) DS-DE 12 (Rev. 08/04)	Signature/				

(1) Name	MARGARET FINEBERG	NEBERG (2) I.D. Number97			7		
	9/27/2008		1	0/10/2008			
(3) Cover Perid	od//	thr	ough	//	(4) Page		of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	1	ontributor	Contribution Type	In-kind Description	Amendment	Amount
10/10/2008 / /	Fish, Paul 10511 Bella Vista Drive Fort Myers, FL 33913		retired	IK	printer and office supplies		\$128.40
10/4/2008 / / 2	Fineberg, Margaret PO Box 60274 Fort Myers, FL 33906		legislati ve administr ator	IK	copies		\$2.29
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DS-DE 13 (Rev. 08/0	L						

DS-DE 13 (Rev. 08/03)

(1) Name MARGA	CAMPAIGN TREASURER'S F	6	2) I.D. Number		97
(3) Cover Period _	9/27/2008 10 / / through	/10/2008 _// (	4) Page1	of	0
(5) Date (6) Sequence Number	(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
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_/ /					·
11					<u> </u>
11					· <u>·····</u> ···
11					

(1) MARGARET_FINEBERG       OFFICE USE ONLY       97         Name       97       97         (2) P 0 B0X 60274, FORT MYERS, FL 33906       Address (number and street)       97         City, State, Zip Code       (3) ID Number:       97         City, State, Zip Code       (3) ID Number:       97         Check appropriate box(es):       97       97         (4) Check appropriate box(es):       97       97         (5) Committee       CHECK IF PC HAS DISBANDED       97         (4) Check appropriate box(es):       97       97         (5) Committee       CHECK IF PC HAS DISBANDED       97         (6) Committee       CHECK IF No OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED       9726/2008         Cover Period:       From       9/13/2008       70         (5) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT       Monetary         (6) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT       0.00         Loans       \$ 0.00       Transfers to Office       Account       \$ 0.00         In-Kind       \$ 200.00       (8) Other Distributions       0.00       160.03	FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY					
(2)       P O BOX 60274, FORT MYERS, FL 33906         Address (number and street)         City, State, Zip Code         CHECK IF ADDRESS HAS CHANGED       (3) ID Number:         (4)       Check appropriate box(es):         Committee       CHECK IF ADDRESS HAS CHANGED         Committee of Continuous Existence       CHECK IF PC HAS DISBANDED         Committee of Continuous Existence       CHECK IF NO OTHER ELECTIONEERING         Communication       CHECK IF NO OTHER ELECTIONEERING         Cover Period:       From         9/13/2008       To         9/26/2008       Report Type         GO original       Amendment         Loans       0.00         Total Monetary       345.00         In-Kind       200.00    (8) Other Distributions		OFFICE USE ONLY 97				
Address (number and street)       Image: City, State, Zip Code         City, State, Zip Code       (3) ID Number:         Check IF ADDRESS HAS CHANGED       (3) ID Number:         (4) Check appropriate box(es):       Image: Check IF Address (CDD-3)         Candidate (office sought):       GATEWAY CDD-3         Political Committee       CHECK IF PC HAS DISBANDED         Committee of Continuous Existence       CHECK IF CCE HAS DISBANDED         Party Executive Committee       CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED         Cover Period:       From         9/13/2008       To         9/26/2008       Report Type         GO riginal       Amendment         Special Election Report       Independent Expenditure Report         (6) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT         Cash & Checks       345.00         Loans       0.00         Total Monetary       345.00         In-Kind       200.00         (8) Other Distributions	•••••	ġ				
(4) Check appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Communication       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Cover Period:       From       9/13/2008       To appropriate box(es):       Report Type       G2         Image: Cover Period:       From       9/13/2008       To appropriate box(es):       Image: Cover period:       Report Type       G2         Image: Cover Period:       From       9/13/2008       To appropriate box(es):       Image: Cover period:       Image:						
(4) Check appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Communication       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Cover Period:       From       9/13/2008       To appropriate box(es):       Report Type       G2         Image: Cover Period:       From       9/13/2008       To appropriate box(es):       Image: Cover period:       Report Type       G2         Image: Cover Period:       From       9/13/2008       To appropriate box(es):       Image: Cover period:       Image:	- · ·					
(4) Check appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Continuous Existence       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Image: Committee of Communication       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):       Image: Check is appropriate box(es):         Cover Period:       From       9/13/2008       To appropriate box(es):       Report Type       G2         Image: Cover Period:       From       9/13/2008       To appropriate box(es):       Image: Cover period:       Report Type       G2         Image: Cover Period:       From       9/13/2008       To appropriate box(es):       Image: Cover period:       Image:	City, State, Zip Code					
Party Executive Committee       Check IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED         (5) REPORT IDENTIFIERS       9/26/2008 /         Cover Period:       From       9/13/2008         To       9/26/2008 /       Report Type         Goriginal       Amendment       Special Election Report       Independent Expenditure Report         (6) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT         (6) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT         (ash & Checks       \$ 345.00         Loans       \$ 0.00         Total Monetary       \$ 345.00         In-Kind       \$ 200.00         (8) Other Distributions       0.00	CHECK IF ADDRESS HAS CHANGED					
Party Executive Committee       Check IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED         (5) REPORT IDENTIFIERS       9/26/2008 /         Cover Period:       From       9/13/2008         To       9/26/2008 /       Report Type         Goriginal       Amendment       Special Election Report       Independent Expenditure Report         (6) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT         (6) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT         (ash & Checks       \$ 345.00         Loans       \$ 0.00         Total Monetary       \$ 345.00         In-Kind       \$ 200.00         (8) Other Distributions       0.00						
□ Party Executive Committee       □ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED         □ Electioneering Communication       □ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED         Cover Period:       From       9/13/2008       7         ③ Original       □ Amendment       □ Special Election Report       □ Independent Expenditure Report         (6)       CONTRIBUTIONS THIS REPORT       (7)       EXPENDITURES THIS REPORT         (6)       CONTRIBUTIONS THIS REPORT       (7)       EXPENDITURES THIS REPORT         (ash & Checks       \$       345.00       Yependitures       160.03         Loans       \$       0.00       Transfers to Office Account       0.00         Total Monetary       \$       345.00       Total Monetary       160.03         In-Kind       \$       200.00       (8)       Other Distributions						
Party Executive Committee         Electioneering Communication         (5) REPORT IDENTIFIERS         0/13/2008         0/13/2008         0/13/2008         0/13/2008         0/13/2008         0/13/2008         0/13/2008         0/13/2008         0/13/2008         0/13/2008         0/13/2008         10         Perty Executive Communication         (5) REPORT IDENTIFIERS         0/13/2008         10         Amendment         Special Election Report         (7) EXPENDITURES THIS REPORT         (6) CONTRIBUTIONS THIS REPORT         Cash & Checks         10.00         Loans         10.00         Total Monetary         10.00         In-Kind         10.00         (8) Other Distributions						
COMMUNICATION REPORTS WILL BE FILED         (5) REPORT IDENTIFIERS         0 riginal       Amendment       \$9/26/2008 /       Report Type       G2         I Original       Amendment       Special Election       Report       Independent Expenditure Report         (6)       CONTRIBUTIONS THIS REPORT       (7)       EXPENDITURES THIS REPORT         (6)       CONTRIBUTIONS THIS REPORT       (7)       EXPENDITURES THIS REPORT         Cash & Checks       \$       345.00       Transfers to Office         Loans       \$       0.00       Total         Monetary       \$       345.00       160.03         In-Kind       \$       200.00       100						
Cover Period:       From       9/13/2008       To       9/26/2008       /       Report Type       G2         Image: Cover Period:       Amendment       Special Election       Report       Independent Expenditure Report         Image: Cover Period:       Amendment       Special Election       Report       Independent Expenditure Report         (6)       CONTRIBUTIONS THIS REPORT       (7)       EXPENDITURES THIS REPORT         Cash & Checks       \$       345.00       Monetary         Loans       \$       0.00       Transfers to Office         Account       \$       0.00       Total         Monetary       \$       200.00       160.03         In-Kind       \$       200.00       (8)       Other Distributions	Electioneering Communication     CHECK IF NO OTHER ELECTIONEERING					
Cover Period:       From       /       /       To       /       /       Report Type       G2         [X] Original       Amendment       Special Election       Report       Independent Expenditure Report         (6)       CONTRIBUTIONS THIS REPORT       (7)       EXPENDITURES THIS REPORT         (6)       CONTRIBUTIONS THIS REPORT       (7)       EXPENDITURES THIS REPORT         Cash & Checks       \$       345.00       Monetary         Loans       \$       0.00       Transfers to Office         Account       \$       0.00       Total         In-Kind       \$       200.00       160.03         (8)       Other Distributions       0.00	(5) REPORT					
(6) CONTRIBUTIONS THIS REPORT       (7) EXPENDITURES THIS REPORT         Cash & Checks       \$ 345.00         Loans       \$ 0.00         Total Monetary       \$ 345.00         In-Kind       \$ 200.00    (7) EXPENDITURES THIS REPORT Monetary Expenditures 160.03 Transfers to Office Account 10.00 Total Monetary 160.03 (8) Other Distributions	Cover Period: From / To	9/26/2008 / Report TypeG2				
Cash & Checks       \$345.00       Monetary       Expenditures       \$160.03         Loans       \$0.00       Transfers to Office       Account       \$0.00         Total Monetary       \$345.00       Total       0.00       Total         In-Kind       \$00.00       (8) Other Distributions       0.00	Independent Expenditure Report					
Cash & Checks         \$ 345.00         Expenditures         \$ 160.03           Loans         \$ 0.00         Transfers to Office         Account         \$ 0.00           Total Monetary         \$ 345.00         Total         \$ 0.00         \$ 160.03           In-Kind         \$ 200.00         (8) Other Distributions         0.00	(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
Total Monetary         \$ 345.00         Account         \$ 0.00           In-Kind         \$ 200.00         Total         Monetary         \$ 160.03           (8)         Other Distributions         0.00	Cash & Checks \$ 345.00					
Total Monetary         \$ 345.00         Total           In-Kind         \$ 200.00         \$ 160.03           (8) Other Distributions         0.00	Loans \$0.00	Account 6				
In-Kind \$(8) Other Distributions	Total Monetary \$ 345.00					
	In-Kind \$ 200.00	Monetary \$ 160.03				
(9) TOTAL Monetary Contributions To Date (10) TOTAL Monetary Expenditures To Date	(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
\$\$\$\$						
(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.		I certify that I have examined this report and it is true, correct, and complete.				
(Type name) MARGARET FINEBERG (Type name) MARGARET FINEBERG	(Type name) MACGARET FINEBERG	(Type name) MARGARET FINEBERG				
Individual (only for Treasurer Deputy Treasurer Candidate Chairperson (only for PC, PTY & electioneering commun.)						
X Magnet Fineberg X Margaret Fineberg	* Magnet Fineberg	X Magacet Fineberg				
Signature Signature	Signature	Signature				

1.1	MARGARET FINEBERG				(2) I.D. Numbe		u
	9/13/2008			/26/2008		,	3
(3) Cover Pe	riod / /	thr	ough	//_	(4) Pag	e	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	-	Occupation	Туре	Description	Amendment	Amount
9/26/2008 / /	Fish, Paul 10511 Bella Vista Drive Fort Myers, FL 33913	I	retired computer consult	IK	printer supplies, and office voter data		\$200.0
1					VOLET GALA		
9/19/2008 / /	Stacy, David 12699 Stone Valley Loop Fort Myers, Fl 33913	I	retired	Сн			\$25.(
2							
9/19/2008 / /	Lancaster, Janice 12545 Stone Valley Loop Fort Nyers, Fl 33913	I	retired	CA			\$20.0
3							
9/26/2008	Algeo, Scott 12434 Pebblestone Court Fort Myers, Pl 33913	I	flooring contractor	СН			\$25.0
4							
9/26/2008 / /	Bucar, Sherry 12498 Pebblestone Court Fort Myers, Fl 33913	I	retired	СН			\$25.0
5				;			
9/26/2008 / /	Senger, David 10504 Bella Vista Drive Fort Myers, Fl 33913	I	retired	СН			\$100.0
5							
9/26/2008	Rife, Sam 10541 Avila Circle Fort Myers, Fl 33913	I	retired	СН			\$50.0
7							
9/26/2008 / /	Wolfgang, Earl 9258 Breno Drive Fort Myers, Fl 33913	I	retired	СН			\$100.0
3							

DS-DE 13 (Rev. 08/03)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) NameMARGARET_FINEBERG(2) I.D. Number97					
(3) Cover Perio	9/13/2008 1//through	9/26/2008	(4) Page 1	of	1
(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 contribution to a candidate)	if Expenditure Type	Amendment	Amount
9/22/2008 1	Stoneybrook Website, Pebblebrook Blvd Fort Myers, FL 33913	advertisi web ng	MO		\$106.00
9/20/2008	Staples, 3236 Forum Blvd Fort Myers, FL 33905	printer ink	MO		\$54.03
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11					
11					
DS-DE 14 (Rev. (	)8/03)		1		

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY				
(1) MARGARET FINEBERG	OFFICE USE ONLY 97			
Name				
(2) P O BOX 60274, FORT MYERS, FL 33906				
Address (number and street)				
	085EP19			
City, State, Zip Code				
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:			
(4) Check appropriate box(es):				
Candidate (office sought): GATEWAY CDD-3	provide a second s			
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 / To	9/12/2008 / Report TypeG1			
I Original Amendment Special Election	Report Independent Expenditure Report			
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT			
Cash & Checks \$ 0.00	Monetary Expenditures \$ 295.00			
Loans \$300.00	Transfers to Office Account \$ 0.00			
Total Monetary \$ 300.00	Total			
	Monetary \$ 295.00			
In-Kind \$ 129.05				
	(8) Other Distributions \$ 0.00			
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date			
\$400.00	¢			
	▶295.00_			
(11) CERT	IFICATION			
	on 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.	I certify that I have examined this report and it is true, correct, and complete.			
(Type name) MARCARET FINEBERG	(Type name) MARCARET FINIERERGY			
(Type name)       (Type name)       (Type name)       (Type name)       (Type name)         Individual (only for election cering commun.)       (Type name)       (Type name)       (Type name)       (Type name)         Individual (only for election cering commun.)       (Type name)       (Type name)       (Type name)       (Type name)				
X Margaret Fineberg	X Magaret Fireberg			
Signature 7	Signature			

(1) Name _	MARGARET FINEBERG				(2) I.D. Number	•	97
	8/22/2008		9	/12/2008		1	. 1
(3) Cover Pe	eriod / /	throug	gh	//_	(4) Page		_ of _ <sup></sup>
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	Cont	tributor	Contribution	in-kind		
Number	City, State, Zip Code		Occupation	Туре	1 1	Amendment	Amount
9/11/2008 / /	Fineberg, Margaret PO Box 60274 Fort Myers, FL 33906	I fo ci em	ort myers ty mployee	LO		<del>-</del>	\$300.00
9/12/2008 / /	Fish, William P 10511 Bella Vista Dr Fort Myers, FL 33913	I re co on	etired pmputerc isultant	IK	office supplies, printer ink, card stock, voter		\$129.05
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1 1							
1 1							
1 1							
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(1) Name MARC	CAMPAIGN TREASURER'S R GARET FINEBERG	(	) EXPENDIT 2) I.D. Number		97
(3) Cover Perio	8/22/2008 9/ d/ through	12/2008	4) Page1		1
(5) Date (6) Sequence Number	(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
8/29/2008 1	Wachovia Bank, PO Box 563966 Charlotte, NC 28256	check printing	мо		\$8.00
9/11/2008	Seabreeze Communications, 5630 Halifax Ave. Fort Myers, FL 33912	advertise ment	мо		\$287.00
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DS-DF 14 (Rev. (	000		······	<u> </u>	

WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)	AUG 2 2 2008					
MARGARET FINEBERG P O BOX 60274 FORT MYERS, FL 33906 Candidate's Name (Last, Suffix, First, Middle)	GATEWAL COD Identification Number (Assigned by Division					
OR Political Committee, CCE or Party Name Address (Number and Street)	of Elections) Office Sought (Include District, Circuit or Group Number)					
City State Zip Code						
Candidate Committee of Continuous Existence	Check box if address has changed since last report.					
Political Committee Party Executive Committee Check here if PC or CCE has DISBANDED and will no longer file reports.						
	TYPE OF REPORT (Check Appropriate Box)					
QUARTERLY REPORTS PRIMARY ELECTION	GENERAL ELECTION					
□ January □ 32nd day prior	46th day prior					
April 18th day prior	32nd day prior					
□ July □ 4th day prior	TERMINATION REPORT     18th day prior					
October	SPECIAL ELECTION     4th day prior					
NOTIFICATION OF NO ACTIVITY IN CAMPAIGN	NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF					
8/2/2008 through 8/21/2008 (F3)						
X Marguet Fineberg 8/22/08 Signature Date						
SIGNATURES REQUIRED FOR: Candidates Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Political Committees Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Committees of Continuous Existence Treasurer (s. 106.04(4)(c), F.S.) Party Executive Committees Treasurer or Chairman (s. 106.29(2), F.S.)						
In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.						

	FLORIDA DEPARTMENT OF ST	ATE DIVISION OF ELECTIONS R'S REPORT SUMMARY			
(1)		OFFICE USE ONLY 97			
(.,	MARGARET FINEBERG				
(2)	P O BOX 60274, FORT MYERS, FL 33906				
(,	Address (number and street)				
	•				
	City, State, Zip Code				
	CHECK IF ADDRESS HAS CHANGED	(3) ID Number:			
(4)	(4) Check appropriate box(es):				
	X Candidate (office sought): GATEWAY CDD-3				
	Political Committee	CHECK IF PC HAS DISBANDED			
	Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED			
	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 IDENTIFIERS 8/1/2008 / Report Type F2			
		IDENTIFIERS			
<b>.</b>	7/19/2008	$\frac{8/1/2008}{1}$ / Report Type F2			
Cov	er Period: From / To To	/ Report Type 6			
XC	Driginal 🔲 Amendment 🔄 Special Election	Report Independent Expenditure Report			
(6)	CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT			
		Monetary			
Cas	h & Checks \$0.00	Expenditures \$ 0.00			
Loa	ns \$100.00	Transfers to Office			
		Account \$0.00			
Tota	Il Monetary \$100.00	Total			
	<b>e</b> 0.00	Monetary \$ 0.00			
In-K	ind \$				
		(8) Other Distributions			
		\$			
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date			
1-7	\$	¢			
	Ψ <u> </u>	· · · · · · · · · · · · · · · · · · ·			
	(11) CERT	IFICATION			
		on to falsify a public record (ss. 839.13, F.S.)			
	tify that I have examined this report and it is true, ect, and complete.	I certify that I have examined this report and it is true, correct, and complete.			
(Type name) MARGARET FINEBERG (Type name) MARGARET FINEL					
Ē	individual (only for Treasurer Deputy Treasurer	Candidate Chairperson (only for PC, PTY &			
	ection eering commun.)	electioneering commun. organization)			
	Illaugurer Fineberg	~ 11 pagaret Fineblig			
S	ignature//	Signature			

(1) Name	eMARGARET_FINEBERG			(2) I.D. Number			
	7/19/2008		8	/1/2008			
(3) Cover Perie	od / /	thro	ugh	/ /	(4) Pag	e	of _1
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/22/2008	Fineberg, Margaret P. O. Box 60274 Fort Myers, FL 33906			LO	Description		\$100.00
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DS-DE 13 (Rev. 08/0	)				AND CODE VAL		

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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(1) Name MARGAI	AMPAIGN TREASURER'S		2) EXPENDIT (2) I.D. Number		97
	7/19/2008 //through	8/1/2008 //	4) Page <u>1</u>	of	0
(5) Date (6) Sequence Number	(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
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DS-DE 14 (Rev. 08	/03)	<u>l</u> ,			

WAIVER OF REPORT (Section 106.07(7), F.S.)	OFFICE USE ONLY				
(PLEASE TYPE)					
l	97				
MARGARET FINEBERG P O BOX 60274 FORT MYERS, FL 33906	GATEWAY CDD-3				
Candidate's Name (Last, Suffix, First, Middle) OR Political Committee, CCE or Party Name	Identification Number (Assigned by Division of Elections)				
Address (Number and Street)	Office Sought (Include District, Circuit or Group Number)				
City State Zip Code					
Candidate Committee of Continuous Existence	Check box if address has changed since last report.				
Political Committee Party Executive Committee	Check here if PC or CCE has DISBANDED and will no longer file reports.				
TYPE OF R (Check Appro)					
QUARTERLY REPORTS PRIMARY ELECTION	GENERAL ELECTION				
□ January □ 32nd day prior	46th day prior				
April 18th day prior	32nd day prior     TERMINATION REPORT				
□ July □ 4th day prior	18th day prior     SPECIAL ELECTION				
	4th day prior				
NOTIFICATION OF NO ACTIVITY IN CAMPAIGN A	CCOUNT FOR THE REPORTING PERIOD OF				
4/1/2008 throug	gh <u>7/18/2</u> 008 (F1 )				
X Margaret Fineberg Signature	7 <u>/25/2008</u> Date				
SIGNATURES REQUIRED FOR:       Candidates Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Political Committees Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Committees of Continuous Existence Treasurer (s. 106.04(4)(c), F.S.) Party Executive Committees Treasurer or Chairman (s. 106.29(2), F.S.)         In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.					

\*08JUL25PM1243 SDE Lee Co F1