

# LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	JAMES A. JANEK		
Residence Address	3441 POINTE CREEK CT. #104		
City and Zip Code	BONITA SPRINGS, 34134		
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239-390-0985	OR	Cell 330-853-7630
Email Address	JANEKJ@earthlink.net		
Office Sought	BOARD OF SUPERVISORS		
Area, District, Group Or Seat Number	BAY CREEK C.I.D. seat 3		
Political Party (If Applicable)			
Date Of Birth Or Voter ID #	05-023987		
Date	May 31, 2008		
Candidate Signature	X <i>James A. Janek</i>		

**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 may be 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.**

SCANNED

STATE OF FLORIDA  
APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES  
(Section 106.021(1), F.S.)

OFFICE USE ONLY

(PLEASE TYPE)

CHECK APPROPRIATE BOX.

Original Appointment  
Name of Candidate: JANEK, JAMES A  
#104  
3441 POINTE CREEK CT  
BONITA SPRINGS FL 34134

111450575  
 Campaign Treasurer  Secondary Depository  
Office box or street, city, state, zip code)

Telephone (optional): (239) 390-0985  
2. Party (Partisan candidates only): N/A  
3. Office (add district, circuit, group number): BAY CREEK CDD - SEAT 3

I have appointed the following person to act as my  Campaign Treasurer  Deputy Treasurer

4. Name of Treasurer: JANEK, JAMES A  
111450575

5. Mailing Address: #104  
3441 POINTE CREEK CT  
BONITA SPRINGS FL 34134

6. Telephone: 239-390-0985

7. City: BONITA SPRINGS  
10. Zip Code: 34134

I have designated the following named bank as my  Primary Depository  Secondary Depository

11. Name of Bank: REGIONS BANK  
12. Street Address: 24836 STAMIAMI TRL

13. City: BONITA SPRINGS  
14. County: LEE  
15. State: FL  
16. Zip Code: 34134

17. Signature of Candidate: X James A Janek  
Date: 9/22/08

Campaign Treasurer's Acceptance of Appointment

I, JANEK, JAMES A  
#104  
3441 POINTE CREEK CT  
BONITA SPRINGS FL 34134  
 Campaign Treasurer  Deputy Treasurer  
111450575  
Accepted the appointment as

who is seeking nomination or election as a candidate to the office of  
(Party)

BAY CREEK CDD - SEAT 3. As a duly registered voter in LEE

County, Florida, I am qualified to accept this appointment.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

9/22/08  
Date  
X James A Janek  
Signature of Campaign Treasurer or Deputy Treasurer

SCANNER

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

111450575

JANEK, JAMES A  
#104  
3441 POINTE CREEK CT  
BONITA SPRINGS FL 34134

I, \_\_\_\_\_,  
candidate for the office of BAY CREEK CDD - SEAT 3;

have received, read and understand the requirements of Chapter 106,  
Florida Statutes.

X James P. Janek  
Signature of Candidate

9/22/08  
Date

08SEP22PM0130 SDE Lee Co FL

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

**SCANNER**

OFFICE USE ONLY

**STATEMENT OF CANDIDATE**

(Section 106.023, F.S.)  
(Please Type)

I, JAMES JANEK,

candidate for the office of COMMUNITY DEVELOPMENT DISTRICT ;  
BOARD SUPERVISOR SEAT 3

have received, read and understand the requirements of Chapter 106,  
Florida Statutes.

X James A. Janek  
Signature of Candidate

May 19, 2008  
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

**SCANNED**

# AFFIDAVIT OF INTENT LEE COUNTY SPECIAL DISTRICT CANDIDATE

State of Florida  
County of Lee

I, JAMES A. JANEK, am a candidate for the Special District  
(print name)

office of: BAYCREEK C.D.D. seat #3  
(district name and district #, seat #, or area#)

in the November 4, 2008 election. 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, I will not be required to: 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, prior to doing so, I understand that I AM REQUIRED TO FIRST FILE 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.

X James A. Janek  
Signature of Candidate

May 31, 2008  
Date

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."

SCANNED

# LOYALTY OATH FOR NON-PARTISAN OFFICE

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

LEE COUNTY

OFFICE USE ONLY

I, <u>JAMES</u>	<u>A.</u>	<u>JANEK</u>
First Name	Middle Name/Initial	Last Name

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)

I, JAMES JANEK  
(PLEASE PRINT NAME AS YOU WISH IT TO BE WRITTEN IN ON THE BALLOT — NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of C.D.D. BOARD SUPERVISOR, BAY CREEK, Seat 3  
(office) (district) (group)

My legal residence is LEE County, Florida. I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected. I 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.

<input checked="" type="checkbox"/> <u>James A. Janek</u>	CELL <u>330-853-7630</u> <u>(239) 390-0985</u>	<u>JANEK JN@YAHOO.com</u>
Signature of Candidate	Daytime Telephone Number	Email Address

<u>3441 POINTE CREEK Ct #104, BONITA SPRINGS, FL</u>	<u>34134</u>
Address	ZIP Code

Sworn to (or affirmed) and subscribed before me this 3rd day of June, 2008.

Personally Known: \_\_\_\_\_ or

Produced Identification: P

Type of Identification Produced:

Drivers License

Tanya L. Allman  
Signature of Notary Public - State of Ohio  
Print, Type or Stamp Commissioned Name of Notary Public



TANYA L. ALLMAN  
Notary Public, State of Ohio  
My Commission Expires 09-06-2010

SCANNED

FORM 1

STATEMENT OF

2007

FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

LAST NAME -- FIRST NAME -- MIDDLE NAME:  
*JANEK - JAMES A.*

MAILING ADDRESS:  
*3441 POINTE CREEK CT #104*

CITY: *BONITA SPRINGS* ZIP: *34134* COUNTY: *LEE*

NAME OF AGENCY:  
*SUPERVISOR BAYCREEK CDD seat 3*

NAME OF OFFICE OR POSITION HELD OR SOUGHT:  
*SUPERVISOR*

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

100 JUN 09 PM 12:47 SOE Lee Co FI

PDF 2007

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

\*\*BOTH PARTS OF THIS SECTION MUST BE COMPLETED\*\*

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):

DECEMBER 31, 2007 OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR  DOLLAR VALUE THRESHOLDS

PART A - PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
<i>OHIO STATE TEACHER Retirement System</i>	<i>275 E. BROAD ST. COLUMBUS, OH 43215</i>	<i>PENSION</i>
<i>SMITH BARNEY</i>	<i>4137 BOARDMAN - CANFIELD Rd, Ste. 109 CANFIELD OHIO 44406</i>	<i>INVESTMENT INCOME</i>

PART B - SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
<i>NONE</i>			

PART C - REAL PROPERTY [Land, buildings owned by the reporting person]

<i>X</i>

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

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 described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc.)	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
STOCKS	Stocks, Corp. BONDS, MUTUAL FUNDS, ANNUITY
CORP BONDS	ENMA, FHA, HLD, BONDS, EARN INTEREST, DIVIDENDS
Govt. BONDS	
MUTUAL FUNDS	EARN INTEREST and Dividends
ANNUITY	

PART E — LIABILITIES [Major debts]	
NAME OF CREDITOR	ADDRESS OF CREDITOR
NONE	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]			
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	NONE		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required): *James A. Janek* DATE SIGNED (required): *June 2, 2008*

**FILING INSTRUCTIONS:**

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

**WHERE TO FILE:**  
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.

**WHEN TO 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.

**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.

**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 Boulevard, South, Suite 201, Tallahassee, FL 32312.

**Candidates** file this form together with their qualifying papers.

**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.

Facsimiles will not be accepted.

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

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

OFFICE USE ONLY 126

(1) JAMES JANEK  
Name

(2) 3441 POINTE CREEK CT #104, BONITA SPRINGS, FL 34134  
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 106

**FINAL REPORT**

(4) Check appropriate box(es):

Candidate (office sought): BAY CREEK 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 NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 10/31/2008 To 2/2/2009 Report Type TR-4

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 7.20

Transfers to Office Account \$ 0.00

Total Monetary \$ 7.20

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date  
\$ 350.00

(10) TOTAL Monetary Expenditures To Date  
\$ 347.31

**(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) JAMES A. JANEK

(Type name) JAMES A. JANEK

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

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

James A. Janek  
Signature

James A. Janek  
Signature

*must not subtract right.  
Sorry!!  
ZERO*

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name JAMES JANEK

(2) LD. Number 126

10/31/2008 through 2/2/2009

(3) Cover Period      /      /      through      /      /     

(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
1/20/2009 / /	JaneK, James 3441 Pointe Creek Ct. #104 Bonita Springs, FL 34134	closed campaign acct. took remaining \$7.20 of my money	MO		\$7.20
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JAMES JANEK (2) I.D. Number 126

10/31/2008 2/2/2009

(3) Cover Period 10/31/2008 through 2/2/2009 (4) Page 1 of 0

(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	Amendment	Amount
/ /							0
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

OFFICE USE ONLY 126

**AMENDED  
REPORT**

(1) JAMES JANEK  
Name

(2) 3441 POINTE CREEK CT #104, BONITA SPRINGS, FL 34134  
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):

Candidate (office sought): BAY CREEK 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 NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 10/11/2008 To 10/30/2008 Report Type G4

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 5.45

Transfers to Office Account \$ 0.00

Total Monetary \$ 5.45

(8) Other Distributions \$ 0.00

**(9) TOTAL Monetary Contributions To Date**

\$ 350.00

**(10) TOTAL Monetary Expenditures To Date**

\$ 340.11

**(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)

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

(Type name) JAMES JANEK

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

**X**

Signature

**X**

Signature

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

(1) Name JAMES JANEK (2) I.D. Number 126

10/11/2008 through 10/30/2008

(3) Cover Period  / /  through  / /  (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name JAMES JANEK

(2) I.D. Number 126

(3) Cover Period 10/11/2008 through 10/30/2008

(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					
10/26/2008 / /	VISTAPRINT,	250 business cards	MO	Add	\$5.45
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

# WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

**JAMES JANEK**  
3441 POINTE CREEK CT #104  
BONITA SPRINGS, FL 34134

Candidate's Name (Last, Suffix, First, Middle)  
OR Political Committee, CCE or Party Name

Address (Number and Street)

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

- January
- April
- July
- October

### PRIMARY ELECTION

- 32nd day prior
- 18th day prior
- 4th day prior

### GENERAL ELECTION

- 46th day prior
- 32nd day prior
- 18th day prior
- 4th day prior

TERMINATION REPORT

SPECIAL ELECTION

## NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

10/11/2008 through 10/30/2008 ( G4 )

X

James Janek  
Signature

10-26-2008  
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.

OFFICE USE ONLY

126

BAY CREEK CDD-3

Identification Number (Assigned by Division of Elections)

Office Sought (Include District, Circuit or Group Number)

08OCT29PM0343 SDE Lee Co FL





**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name JAMES JANEK

(2) I.D. Number 126

9/27/2008 through 10/10/2008

(3) Cover Period      /      /      through      /      /     

(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
10/1/2008 / /	OFFICE MAX, 26831 TAMiami TRAIL BONITA SPRINGS, FL 34134	printing supplies	MO		\$51.90
1					
10/1/2008 / /	OFFICE MAX, 26831 TAMiami TRAIL BONITA SPRINGS, FL 34134	print supplies ink	MO		\$28.61
2					
10/2/2008 / /	BONITA SPRINGS PO, OLD RT. 41 BONITA SPRINGS, FL 34135	postage stamps	MO		\$173.04
3					
10/2/2008 / /	OFFICE MAX, 26831 S. TAMiami TRAIL BONITA SPRINGS, FL 34134	fold, assemble mailing	MO		\$81.11
4					
/ /					
/ /					
/ /					
/ /					

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

**OFFICE USE ONLY** 126

(1) JAMES JANEK  
Name

(2) 3441 POINTE CREEK CT #104, BONITA SPRINGS, FL 34134  
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 126

(4) Check appropriate box(es):

Candidate (office sought): BAY CREEK 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 NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 9/13/2008 To 9/26/2008 / Report Type G2

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 300.00

Loans \$ 0.00

Total Monetary \$ 300.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 300.00

(10) TOTAL Monetary Expenditures To Date

\$ 0.00

**(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)

(Type name) JAMES JANEK

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

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

**X**

**X**

Signature

Signature James Janek



**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name JAMES JANEK

(2) I.D. Number 126

9/13/2008 through 9/26/2008

(3) Cover Period      /      /      through      /      /     

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

*James Jacob*  
3441 Route Creek Ct. #104  
Bonita Springs, FL 34134

FT MYERS FL 339  
02 OCT 2008 PM 5 L



*Bernie Feliciano*

PO Box 2545-33902  
Constitutional Complex

2480 THOMPSON STREET  
Fort Myers, Florida

33901+3074

33901