

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 James A. Janek		

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.

SCANNEL

STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES <small>(Section 106.021(1), F.S.)</small> (PLEASE TYPE)		OFFICE USE ONLY	
CHECK APPROPRIATE BOX. <input checked="" type="checkbox"/> Original Appointment		111450575	
Name of Candidate JANEK, JAMES A #104 3441 POINTE CREEK CT BONITA SPRINGS FL 34134		<input type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository (Post 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 <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer			
4. Name of Treasurer JANEK, JAMES A #104 3441 POINTE CREEK CT BONITA SPRINGS FL 34134			
5. Mailing Address #104 3441 POINTE CREEK CT BONITA SPRINGS FL 34134		6. Telephone 239-390-0985	
7. City		10. Zip Code	
I have designated the following named bank as my <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
11. Name of Bank REGIONS BANK		12. Street Address 24836 S TAMiami TrL	
13. City BONITA SPRINGS	14. County LEE	15. State FL	16. Zip Code 34134
17. Signature of Candidate X <i>James A Janek</i>		Date 9/22/08	
Campaign Treasurer's Acceptance of Appointment			
I, _____ (Please Print Name) <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer		JANEK, JAMES A #104 3441 POINTE CREEK CT BONITA SPRINGS FL 34134	
who is seeking nomination or election as _____ 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 <i>James A Janek</i> Signature of Campaign Treasurer or Deputy Treasurer	

**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

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

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).

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, JAMES A. JANEK
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.

X James A. Janek CELL 330-853-7630
(239) 390-0985 JANEKJN@YAHOO.COM
Signature of Candidate Daytime Telephone Number Email Address

3441 POINTE CREEK CT #104, BONITA SPRINGS, FL 34134
Address City State 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 Florida 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

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

FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME:

JANEK - JAMES A.

MAILING ADDRESS:

3441 POINTE CREEK CT #104

BONITA SPRINGS

34134

LEE

CITY:

ZIP:

COUNTY:

BAY CREEK C.D.D.

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

08JUN06PM1247 SDE 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

OHIO STATE TEACHER Retirement System

275 E. BROAD ST.
COLUMBUS, OH 43215

PENSION

SMITH BARNEY

4137 BOARDMAN - CANFIELD RD, Ste. 109
CANFIELD OHIO 44406

INVESTMENT INCOME

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

NONE

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

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.

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.

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.

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.

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

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.

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.

SCANNED

**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

(4) Check appropriate box(es):

☒ Candidate (office sought): BAY CREEK 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 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.

(Type name) JAMES A. JANEK

☒ Individual (only for electioneering commun.) ☐ Treasurer ☐ Deputy Treasurer

X James A. Janek
Signature

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

(Type name) JAMES A. JANEK

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

X James A. Janek
Signature

*must not subtract right.
Sorry!!
act. is at
ZERO*

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(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 1

(2) I.D. Number 126

2/2/2009

(4) Page 1 of 1

DS-DE 14 (Rev. 08/03)

09JAN23 PM 0307 SDE Lee Co F1

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

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

(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
/ /							0
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) JAMES JANЕК
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

☐ 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 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.

(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)

JAMES JANЕК
☒ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

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

10/11/2008 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 Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /							
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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.

OFFICE USE ONLY

126

BAY CREEK CDD-3

Identification Number (Assigned by Division
of Elections)

Office Sought (Include District, Circuit or
Group Number)

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.

08 OCT 29 PM 03:43 SDE Lee Co FI

**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:** _____

(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 9/27/2008 To 10/10/2008 / **Report Type** G3

☒ **Original** ☐ **Amendment** ☐ **Special Election Report** ☐ **Independent Expenditure Report**

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 50.00

Loans \$ 0.00

Total Monetary \$ 50.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 334.66

Transfers to Office Account \$ 0.00

Total Monetary \$ 334.66

(8) **Other Distributions**
\$ 0.00

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

\$ 350.00

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

\$ 334.66

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

(3) Cover Period 9/27/2008 through 10/10/2008 (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
10/2/2008 / /	JANEK, JAMES 3441 POINTE CREEK CT. #104 BONITA SPRINGS, FL 34134	I	CA			\$50.00
1						
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JAMES JANEK

(2) I.D. Number 126

(3) Cover Period 9/27/2008 through 10/10/2008

(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
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					
/ /					
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/ /					

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

(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.

(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) JAMES JANEK

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

X

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JAMES JANEK (2) I.D. Number 126
 9/13/2008 9/26/2008
 (3) Cover Period 9/13/2008 through 9/26/2008 (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
9/19/2008 / /	Janek, James A 3441 Pointe Creek Ct. #104 Bonita Springs, FL 34134	I	retired	CA		Add	\$300.00
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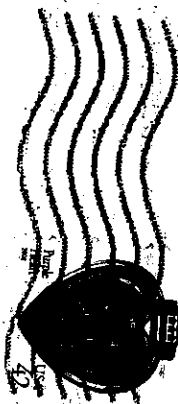
CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JAMES JANEK (2) I.D. Number 126
 9/13/2008 9/26/2008
 (3) Cover Period 9/13/2008 through 9/26/2008 (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
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James Jacob
3441 Route Creek Ct. #104
Bonita Springs, FL 34134

FT MYERS FL 339
02 OCT 2008 PM 5 L



Bernie Feliciano

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Constitutional Complex

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