

# LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

Candidate Name	Stephen McDonnell Jr.		
Residence Address	11372 Lake Cypress Loop		
City and Zip Code	Fort Myers, 33913-7823		
Mailing Address (If different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	(239) 872-0095	OR	
Email Address	ChelseaMCD@aol.com		
Office Sought	Gateway Services Community Dev. Dist.		
Area, District, Group Or Seat Number	Seat 1		
Political Party (If Applicable)	NON		
Date Of Birth Or Voter ID #	111365615		
Date	08 JUN 2008		
Candidate Signature	<input checked="" type="checkbox"/> <i>Stephen McDonnell Jr.</i>		

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

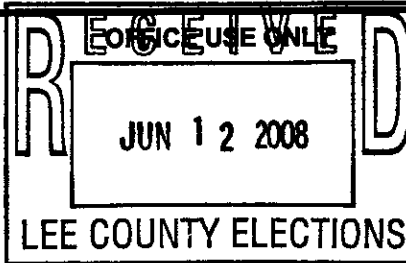
**Candidates who provide an email address may be contacted by this office, via the email address provided by the candidate, for campaign related communications that pertain exclusively to the candidate's campaign.**

**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.)

(PLEASE TYPE)



CHECK APPROPRIATE BOX:

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depository

Name of Candidate: Stephen McDonnell Jr.    1. Address (include post office box or street, city, state, zip code): 11372 Lake Cypresshoop Ft. Myers, FL 33913-7823

Telephone (optional): (239) 872-0095    2. Party (Partisan candidates only): \_\_\_\_\_    3. Office (add district, circuit, group number): Gateway Svcs. CDD Seat 1

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

4. Name of Treasurer or Deputy Treasurer: Stephen McDonnell Jr.

5. Mailing Address (If post office box or drawer add street address): 11372 Lake Cypresshoop Ft. Myers, FL    6. Telephone: (239) 872-0095

7. City: Fort Myers    8. County: Lee    9. State: FL    10. Zip Code: 33913-7823

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

11. Name of Bank: Bank of America    12. Street Address: 11691 Gateway Blvd.

13. City: Fort Myers    14. County: Lee    15. State: FL    16. Zip Code: 33913

17. Signature of Candidate: X Stephen McDonnell Jr.    Date: 08 JUN 2008

**Campaign Treasurer's Acceptance of Appointment**

I, Stephen McDonnell Jr., do hereby accept the appointment as  
 (Please Print or Type)

Campaign Treasurer     Deputy Treasurer    for the campaign of Stephen McDonnell Jr.

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

Gateway Svcs CDD Seat 1 . 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.**

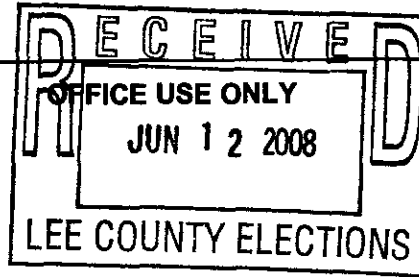
08 JUN 2008  
 Date

X Stephen McDonnell Jr.  
 Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)



I, Stephen M<sup>c</sup>Donnell Jr.,

candidate for the office of Gateway Services Community Development Dist ;  
Seat 1

have received, read and understand the requirements of Chapter 106,

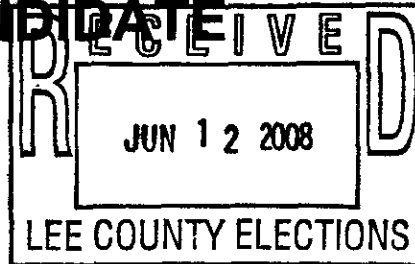
Florida Statutes.

X Stephen M<sup>c</sup>Donnell Jr.  
Signature of Candidate

08 JUN 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, Stephen M<sup>c</sup>Donnell Jr., am a candidate for the Special District  
(print name)

office of: Gateway Services Community Development District Seat #1  
(district name and district #, seat #, or area#)

in the 04 NOV 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 Stephen M<sup>c</sup>Donnell Jr.  
Signature of Candidate

08 JUN 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

*gar*

I,

Stephen

First Name

-

Middle Name/Initial

McDonnell

Last Name

Jr.

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, Steve McDonnell

(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 Gateway Svcs CDD , Seat 1 , \_\_\_\_\_  
(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 Stephen McDonnell Jr  
Signature of Candidate

(239) 872-0095  
Daytime Telephone Number

ChelseaMcD@aol.com  
Email Address

11372 Lake Cypress Loop Fort Myers FL 33913-7823  
Address City State ZIP Code

Sworn to (or affirmed) and subscribed before me this 12th day of June, 2008.

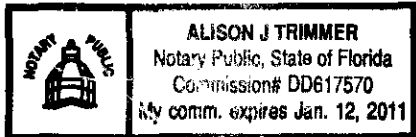
Personally Known: X or \_\_\_\_\_

Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_

Alison J. Trimmer  
Signature of Notary Public - State of Florida

Print, Type or Stamp Commissioned Name of Notary Public



08JUN2008 11:39:56E Lee Co Fl

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

FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME :

McDonnell, Stephen, - Jr.

MAILING ADDRESS :

11372 Lake Cypress Loop

CITY: Fort Myers ZIP: 33913-7823 COUNTY: Lee

NAME OF AGENCY: Gateway Services Community Development District

Seat 1

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

\*OBJUNCOM1139 SDE Lee Co Fl

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
Brd. of Cty Comm.	2115 Second St. Ft. Myers, FL 33901	County Govt.
U.S. Navy (DFAS)	1240 East Ninth St. Cleveland, OH 44199	Military
Preventative Maint. of FL	P.O. Box 62207 Ft. Myers, FL 33906	Wholesale Dist.

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
Preventative Maint. of FL	Sutherland Nissan	13985 Tamiami Trl. Ft. Myers, FL 33612	New Auto Dealer
Preventative Maint. of FL	O'Brien Automotive	2850 Colonial Pkwy Ft. Myers, FL	New Auto Dealer

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

N/A

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 INFORMATION you need to file are described on page 3.



**PART D — INTANGIBLE PERSONAL PROPERTY** [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

N/A

**PART E — LIABILITIES** [Major debts]  
NAME OF CREDITOR

ADDRESS OF CREDITOR

~~N/A~~ GMAC (Ditech)

P.O. Box 9001719 Louisville, Ky 40290-1719

**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	N/A		
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):

DATE SIGNED (required):

12 JUN 08

**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 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 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.

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

OFFICE USE ONLY 92

(1) STEVE McDONNELL

Name

(2) 11372 LAKE CYPRESS LOOP, FORT MYERS, FL 33913

Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate (office sought): GATEWAY CDD-1

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 1/5/2009 Report Type TR-SP

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 \$ 25.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 25.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 50.00

(10) TOTAL Monetary Expenditures To Date

\$ 50.00

**(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) Stephen M'Connell Jr.

(Type name) Stephen M'Connell Jr.

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

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

Stephen M'Connell Jr.  
Signature

Stephen M'Connell Jr.  
Signature

**FINAL REPORT**

09JAN05PM0448 SGE Lee Co FI



### CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name STEVE MCDONNELL (2) I.D. Number 92  
 (3) Cover Period 9/27/2008 through 1/5/2009 (4) Page 1 of 9

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation	Type			
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**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name STEVE MCDONNELL  
 9/27/2008 through 1/5/2009

(2) I.D. Number 92  
 (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
10/14/2008 //	McDonnell, Stephen 11372 Lake Cypress Loop Fort Myers, FL 33913-7823	refund donation to campaign and close account	DI		\$25.00
1					
//					
//					
//					
//					
//					
//					
//					
//					

# WAIVER OF REPORT

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

(PLEASE TYPE)

STEVE MCDONNELL  
11372 LAKE CYPRESS LOOP  
FORT MYERS, FL 33913

OFFICE USE ONLY

92

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

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report.                    |
| <input type="checkbox"/> Political Committee  | <input type="checkbox"/> Party Executive Committee         | <input type="checkbox"/> 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

9/13/2008 through 9/26/2008 ( G2 )

X

Stephen McDonnell Jr  
Signature

29 September 08  
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.

# WAIVER OF REPORT

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

(PLEASE TYPE)

STEVE MCDONNELL  
11372 LAKE CYPRESS LOOP  
FORT MYERS, FL 33913

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

Address (Number and Street)

City State Zip Code

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report.                    |
| <input type="checkbox"/> Political Committee  | <input type="checkbox"/> Party Executive Committee         | <input type="checkbox"/> Check here if PC or CCE has DISBANDED and will no longer file reports. |

## OFFICE USE ONLY

92

GATEWAY CDD-1

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

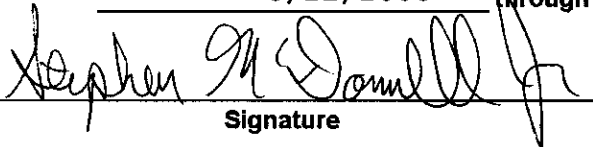
- 46th day prior  
 32nd day prior  
 18th day prior  
 4th day prior

- TERMINATION REPORT  
 SPECIAL ELECTION

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

8/22/2008 through 9/12/2008 ( G1 )

X

  
Signature

18 SEP 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.)

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08SEP24AM0950 SDE Lee Co F1

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



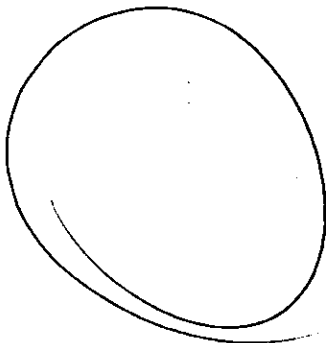
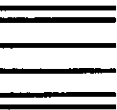
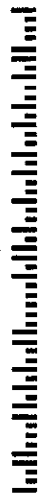
\*08SEP24PM0949SOEL Co F1

**BUSINESS REPLY MAIL**

FIRST CLASS MAIL PERMIT No. 1021 FORT MYERS, FL

POSTAGE WILL BE PAID BY ADDRESSEE

**SUPERVISOR OF ELECTIONS  
PO BOX 2545  
FORT MYERS, FL 33902-9888**



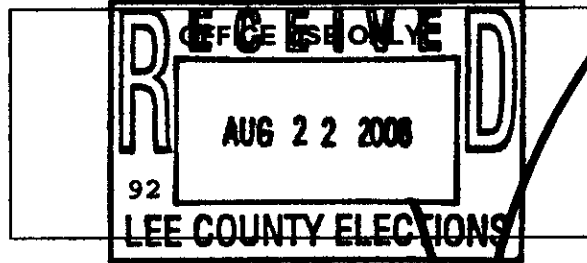
*Postmark  
Mississippi*

# WAIVER OF REPORT

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

(PLEASE TYPE)

STEVE MCDONNELL  
11372 LAKE CYPRESS LOOP  
FORT MYERS, FL 33913



GATEWAY CDD-1

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

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report.                    |
| <input type="checkbox"/> Political Committee  | <input type="checkbox"/> Party Executive Committee         | <input type="checkbox"/> 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

8/2/2008 through 8/21/2008 ( F3 )

X

*Stephen M. Donnell Jr.*  
Signature

22 AUG 08  
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.)

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# WAIVER OF REPORT

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

(PLEASE TYPE)

STEVE MCDONNELL  
11372 LAKE CYPRESS LOOP  
FORT MYERS, FL 33913

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

Address (Number and Street)

City State Zip Code

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report.                    |
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OFFICE USE ONLY

92

RECEIVED  
AUG - 8 2008

GATEWAY CDD-1

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

7/19/2008 through 8/1/2008 ( F2 )

X

Stephen M McDonnell Jr  
Signature

08 AUG 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.

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

**OFFICE USE ONLY** 92

(1) STEVE MCDONNELL  
Name

(2) 11372 LAKE CYPRESS LOOP, FORT MYERS, FL 33913  
Address (number and street)

\_\_\_\_\_  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate (office sought): GATEWAY CDD-1

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 4/1/2008 To 7/18/2008 Report Type F1

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 \$ 25.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 25.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date  
\$ 50.00

(10) TOTAL Monetary Expenditures To Date  
\$ 25.00

**(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) Stephen McDonnell Jr.

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

(Type name) Stephen McDonnell Jr.

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

X Stephen McDonnell Jr.  
Signature

X Stephen McDonnell Jr.  
Signature

08JUL29PM0256 SDE Lee Co F1



## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name STEVE MCDONNELL (2) I.D. Number 92

4/1/2008 through 7/18/2008

(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) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
6/6/2008 / /	MCDONNELL, STEPHEN 11372 LAKE CYPRESS LOOP FORT MYERS, FL 33913-7823	I		CA			\$25.00
1							
6/12/2008 / /	MCDONNELL, STEPHEN 11372 LAKE CYPRESS LOOP FORT MYERS, FL 33913-7823	I		CA			\$25.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name STEVE MCDONNELL

(2) I.D. Number 92

(3) Cover Period 4/1/2008 through 7/18/2008

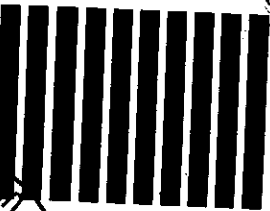
(4) Page 1 of 1

(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					
6/12/2008 //	LEE COUNTY ELECTIONS, 2480 THOMPSON ST FORT MYERS, FL 33901	candidate filing fee	MO		\$25.00
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MCDONNELL, STEPHEN JR  
11372 LAKE CYPRESS LOOP  
FORT MYERS FL 33913

111365615

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**

FIRST CLASS MAIL PERMIT NO. 1021 FORT MYERS, FL

POSTAGE WILL BE PAID BY ADDRESSEE

**SUPERVISOR OF ELECTIONS  
PO BOX 2545  
FORT MYERS, FL 33902-9888**

**BERNIE FELICIANO**

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