

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

(1) ARNOLD A GIBBS

Name

(2) 5909 TARPON GARDENS CIR #201, CAPE CORAL, FL 33914

Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) **Check appropriate box(es):**

Candidate (office sought): SCHOOL BOARD-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 9/11/2010 To 9/24/2010 / Report Type G2

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 \$ _____ 80.50

Transfers to Office Account \$ _____ 0.00

Total Monetary \$ _____ 80.50

(8) Other Distributions \$ _____ 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____ 8,430.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 3,660.12

(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.

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(Type name)

(Type name)

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

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

X

X

Signature

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ARNOLD A GIBBS (2) I.D. Number 161

9/11/2010 through 9/24/2010

(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 ARNOLD A GIBBS

(2) I.D. Number 161

(3) Cover Period 9/11/2010 through 9/24/2010

(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
9/15/2010 / /	Fifth Third Bank, 859 Cape Coral Parkway West Cape Coral, FL 33904	bank fee	MO		\$7.50
1					
9/15/2010 / /	Order Sons of Italy In America, 1231 Cape Coral Parkway East Cape Coral, FL 33904	parade fee	MO		\$20.00
2					
9/13/2010 / /	Arthur Printing, 1518 SE 46th Lane Cape Coral, FL 33904	palm cards	MO		\$53.00
3					
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