| FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| (1) ELINOR SCRICCA  Name  (2) 13731 MAGNOLIA LAKE CT, FORT MYERS, FL 3   | OFFICE USE ONLY 61   |  |  |  |  |  |
| 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-5 ☐ 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   |  |  |  |  |  |  |
| Cover Period: From   | 8/19/2010 / Report Type F3   |  |  |  |  |  |
| ☐ Original   | Report   |  |  |  |  |  |
| (6) CONTRIBUTIONS THIS REPORT  | (7) EXPENDITURES THIS REPORT   |  |  |  |  |  |
| Cash & Checks \$0.00   | Monetary Expenditures \$ 0.00  |  |  |  |  |  |
| Loans \$   | Transfers to Office Account \$ 0.00  |  |  |  |  |  |
| Total Monetary \$  | Total Monetary \$ 0.00   |  |  |  |  |  |
| In-Kind \$   |  |  |  |  |  |  |
|  | (8) Other Distributions \$0.00   |  |  |  |  |  |
| (9) TOTAL Monetary Contributions To Date \$  | (10) TOTAL Monetary Expenditures To Date \$                                    |  |  |  |  |  |
| (11) CERT  |  |  |  |  |  |  |
| 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)  I certify that I have examined this report and it is true, correct, and complete.  (Type name)                                    |  |  |  |  |  |  |
| Individual (only for election eering commun.)  | Candidate Chairperson (only for PC, PTY & electioneering commun. organization) |  |  |  |  |  |
| Signature  | Signature  |  |  |  |  |  |

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

| (1) Name ELINOR SCRICCA (2) I.D. Number 61 |   |                 |              |             |                 |          |
|--|---|-----------------|--------------|-------------|-----------------|----------|
|  |   |                 | 8/19/2010    |             |                 |          |
| (3) Cover Peri                             | od / /                                    | through         | 1 1          | (4) Pag     | ge <sup>1</sup> | of $^1$  |
| WS &                                       | 10  | <del></del>     |              |             | <del></del>     |          |
| (5)  | (7)                                       | (8)             | (9)          | (10)        | (11)            | (12)     |
| Date                                       | Full Name                                 | (0)             | (0)          | (10)        | X               | (12)     |
| (6)  | (Last, Suffix, First, Middle)             |                 |              |             |                 |          |
| Sequence                                   | Street Address &                          | Contributor     | Contribution | In-kind     |                 |          |
| Number                                     | City, State, Zip Code                     | Type Occupation |              | Description | Amendment       | Amount   |
| Number                                     | SCRUCCA, ELEANOR                          | I candidate     |              | Description | Add             | \$791.08 |
| 8/8/2010                                   | 13731 MAGNOLIA CT.<br>FT. MYERS, FL 33907 |                 |              |             |                 | Ų/J1.00  |
|  | FT. MYERS, FL 3390/                       |                 |              |             |                 |          |
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| (1) Name $^{ m ELINO}$    | CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES  1) Name ELINOR SCRICCA (2) I.D. Number 61 |                            |                          |           |        |  |  |
|---------------------------|--|----------------------------|--------------------------|-----------|--------|--|--|
|                           | 7/31/2010  | 8/19/2010<br><b>Jh</b> / / | (4) Page <u>1</u>        |           | 0      |  |  |
| (5)                       | (7)  | (8)                        | (9)                      | (10)      | (11)   |  |  |
| (6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Midd<br>Street Address &<br>City, State, Zip Code           | contribution               | ught if to a Expenditure | Amendment | Amount |  |  |
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