	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	MELISA W GIOVANNELLI	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	5083 LEXINGTON BLVD	Submitted on:							
	Address (number and street)	10/29/2016 16:25:51 (eastern)							
	FORT MYERS, FL 33919 City, State, Zip Code								
	_	(2) ID Number: 1222							
(4)	Check here if address has changed	(3) ID Number: 1232							
(4)	Check appropriate box(es):	^							
		2							
		☐ Check here if PC or ECO has disbanded							
	☐ Party Executive Committee (PTY)	Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed							
	,								
	(5) Report	Identifiers							
Cove	er Period: From <u>10</u> / <u>22</u> / <u>2016</u> To	11 / 3 / 2016 Report Type: <u>G7</u>							
X O	Original Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Cash	h & Checks \$, , ,000	Expenditures \$, 2 , 521 . 36							
er	*								
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$							
T-40	\$ 0.00	Office Account \$, , , 0 . 00							
lota	Il Monetary \$, , , 0 . 00	Total Monetary \$, 2 521 . 36							
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In-Ki	ind \$,,,000	(8) Other Distributions							
		(8) Other Distributions \$, , <u>0</u> 00_							
		,,,,							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$	\$, <u>38</u> , <u>080</u> . <u>47</u>							
	(11) Cert	lification							
	It is a first degree misdemeanor for any perso								
١c	certify that I have examined this report and it is true, corre	ect. and complete:							
	ype name) Individual (only for IE Treasurer Deputy Treasurer	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)							
	electioneering comm.)	☐ Callulate ☐ Chairperson (only for Fo and First)							
v									
X Si	ignature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	MELISA W GIOVANNELL	(2) I.D. Number							
	10/22/2016			1/3/2016					
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e	of		
10045 98			14400						
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)	_		_					
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	A		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _M	MELISA	W	GIOV	ANNELI	ΔI			 (2) I.D. Nur	nber	-	1232	
		10	/22/2	2016		11/3/2	2016					
(3) Cover Pe	eriod		1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/25/2016	Africian Network, 2890 Via Piazza Loop Fort Myers, Fl 33905	banquet	MO		\$100.00
10/26/2016	Florida Mailing & Print, PO Box 61103 Fort Myers, Fl 33906	mailing 11/1	МО		\$1,206.68
10/24/2016	Florida Mailing & Print, PO Box 61103 Fort Myers, Fl 33906	mailing 10/21	МО		\$1,206.68
10/29/2016	Lee County Elections, PO Box 2545 Fort Myers, Fl 33902	absentee list	МО		\$8.00
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