

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MELISA W GIOVANNELLI  
 Name  
 (2) 5083 LEXINGTON BLVD  
 Address (number and street)  
FORT MYERS, FL 33919  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1134767]

Submitted on:  
 11/4/2016 15:10:58 (eastern)

Check here if address has changed

(3) ID Number: 1232

(4) Check appropriate box(es):

- Candidate Office Sought: SCHOOL BOARD-2
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  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

Cover Period: From 10 / 22 / 2016 To 11 / 3 / 2016 Report Type: G7

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 250 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 250 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 132 . 50

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 132 . 50

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 44 , 487 . 43

### (10) TOTAL Monetary Expenditures To Date

\$      , 38 , 230 . 14

### (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 IE or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MELISA W GIOVANNELLI (2) I.D. Number 1232

10/22/2016 through 11/3/2016

(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			
11/3/2016 / /	SW Fl Labor Council, PO Box 152044 Cape Coral, Fl 33915	C	labor council	CH		Add	\$250.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name MELISA W GIOVANNELLI

(2) I.D. Number 1232

(3) Cover Period 10/22/2016 through 11/3/2016

(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
10/24/2016 / /	Sign in One Day, 1415 SE 47th Terrace Cape Coral, Fl 33904	large signs	MO	Add	\$132.50
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