	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	NICHOLAS ALEXANDER	OFFICE USE ONLY					
` '	Name	ONLINE SUBMISSION					
(2)	P O BOX 61764	Submitted on:					
	Address (number and street)	10/12/2018 18:01:56 (eastern)					
	FORT MYERS, FL 33906						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:1357					
(4)	Check appropriate box(es):						
	Candidate Office Sought: SCHOOL BOARD-	6 AT LARGE					
	☐ 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	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cove	er Period: From 9 / 29 / 2018 To	10 / 5 / 2018 Report Type: G4					
⊠ o	riginal Amendment Spo	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
(-)	Communication of the respect	Monetary					
Casl	n & Checks \$, , 695 . 00	Expenditures \$, , 0 . 00					
Loar	ns \$,, <u>0</u> .00	Transfers to					
		Office Account \$, , , 0 . 00					
Tota	I Monetary \$, , <u>695</u> . <u>00</u>	T. 114					
	•	Total Monetary \$, , 0 . 00					
In-Ki	ind \$,, <u>0</u> . <u>00</u>						
		(8) Other Distributions					
		\$, , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$	\$, <u>8</u> , <u>448</u> . <u>70</u>					
		tification on to falsify a public record (ss. 839.13, F.S.)					
Lo		, , , ,					
10	I certify that I have examined this report and it is true, correct, and complete:						
<u> </u>	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
X		X Signature					
31	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	NICHOLA	S ALE	XANDER	(2) I.D. Number						
9/29/2018				10/5/	2018					
(3) Cover Peri	od	1	1	through	1	1	(A) Page	1	of $\frac{1}{2}$	

(E)	(7)	ſ	(0)	(0)	(10)	(14)	(4.2)
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1000 1000 000 100 1000 1000 1000 1000	Stout, Marilyn	I	Оссарацоп	CH	Becomption		\$50.00
9/29/2018	2615 Casibari Ct.						
	Cape Coral, FL 33991						
1							
_							
	Florida Education	F	advocate	СН			\$500.00
9/29/2018	Association,		associatio				
The L	213 Adams Street Tallahasseee, FL 32301		n				
2	,						
2							
9/29/2018	Bilotti, Marjorie	F		СН			\$25.00
9/29/2018	14380 Riva Del Lago						
	Fort Myers, FL 33907						
3							
0./00./0010	Ferrante, Donna R	F		СН			\$100.00
9/29/2018	1516 Inventors Ct Fort Myers, Fl 33901						
i i	Fort Myers, FI 33901						
4							
_							
9/29/2018	Nicholson,	I		СН			\$20.00
9/29/2016 	Elizabeth						
	9971 Cypress Lake Dr Fort Myers, FL 33919						
5							
1 1							
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1 1							
1 1							

(1) Name NICHOL	AMPAIGN TREASURER'S RE LAS ALEXANDER	(2		EXPENDITURES 1.D. Number 1357		
	9/29/2018 10/ /through	5/2018	4) Page <u>1</u>		0	
(5) Date (6) Sequence Number	(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)	(11) Amount	
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