	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)	6/29/2018 07:22:36 (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 6 / 1 / 2018 To	6 / 22 / 2018 Report Type: P1					
× o	riginal Amendment Spo	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
(-)	Communication of the point	Monetary					
Cast	n & Checks \$, , 0 . 00	Expenditures \$, 1,689.00					
J uo.	7 <u> </u>	· · · · · · · · · · · · · · · · · · ·					
Loar	ns \$,,,0.00	Transfers to					
		Office Account \$, , , 0 . 00					
Tota	I Monetary \$,,						
		Total Monetary \$,1 , 689 . 00					
In-Ki	nd \$,, <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					
. ,	\$, _ 9_, 845 . 90	\$,5 , 602 . 84					
		tification on 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:							
_(T	ype name)	_(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	NICHOLAS ALEXANDER				2) I.D. Number	·1	357
	6/1/2018		6	/22/2018		_	
(3) Cover Perio	od / /	thro	ough	11_	(4) Page	1	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
rumber	Oity, Otate, Zip Code	Турс	Occupation	Турс	Description		Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	NICHOLAS	ALEX	ANDER	AND THE RESIDENCE OF THE PARTY		10. 44. 10.	 (2) I.D. Nun	nber		1357	
	6/	1/20	18		6/22/20)18					
(3) Cover Po	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
6/22/2018	Lee County elections, 2480 Thompson St, 3rd Floor Fort Myers, FL 33902	qualification fee	MO		\$1,689.00
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