CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	MARY FISCHER Name	OFFICE USE ONLY ONLINE SUBMISSION						
(2)	5514 SW 12TH AVE	[1162785]						
` '	Address (number and street)	Submitted on:						
	CAPE CORAL, FL 33914	7/26/2018 11:37:59 (eastern)						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1381						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: SCHOOL BOARD-	1						
	Political Committee (PC)	_						
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
	☐ Party Executive Committee (PTY) [☐ Independent Expenditure (IE) (also covers an [☐ Independent Expendent	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)	Check here if no other in of no reports will be med						
	(5) Report	Identifiers						
Cove	er Period: From $\frac{7}{2}$ / $\frac{7}{2}$ / $\frac{2018}{2018}$ To	7 / 20 / 2018 Report Type: P3						
X O	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	n & Checks \$,, <u>500</u> . <u>00</u>	Monetary						
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Tota	I Monetary \$,, <u>500</u> . <u>00</u>	Total Monetary \$, , 0 . 00						
In-Ki	ind \$, , 0 . <u>00</u>							
		(8) Other Distributions \$, , 0 00						
		,,,						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$, <u>2</u> , <u>962</u> . <u>00</u>						
(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:								
(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	MARY FISCHER	(2) I.D. Number ₁₃₈₁						
7/7/2018			7	7/20/2018				
(3) Cover Perio	od//	thro			(4) Pag	je ¹	of ¹	
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(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name		(0)	(0)	(19)	(1)	(12)	
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &		ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
rumoor	Island Coast FEA,		union	CH	Becompain		\$500.0	
7/11/2018	6830 International Center 1		representa tive				•	
<i>f</i> 1	Fort Myers, Fl 33912		tive					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name MARY FISCHER (2) I.D. Number 1381										
	7/7/2018 7 	/20/2018) 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) Amendment	(11)					
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